

L23000209786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

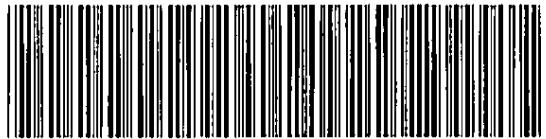
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

Light Workers Technologies L.L.C.

**SUBJECT:** \_\_\_\_\_ Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Trask

Name of Person

Light Workers Technologies L.L.C.

Firm/Company

21 blackwell pl

Address

Palm Coast, Florida 32137

City/State and Zip Code

traskm99@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Trask

808

557-0593

at (\_\_\_\_\_)

Name of Person

Area Code &amp; Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee

**📁 \$55 Filing Fee & Certified Copy**

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*


1. Name of the limited liability company: Light Workers Technologies L.L.C.
2. (a) 21 blackwell pl  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
Palm Coast, Florida  
32137  
4/27/2023
- (b) 21 blackwell pl  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
Palm Coast, Florida  
32137  
123000209786
3.                      Date of filing/registration in Florida                      4.                      Document number
5. (a) UNITED STATES CORPORATION AGENTS, INC  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
476 RIVERSIDE AVE  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
JACKSONVILLE, FL 32202
- (b) MICHAEL TRASK  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
21 BLACKWELL PL  
NEW Registered Office Address:  
PALM COAST FL 32137

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
Signature of a member or authorized representative of a member

MICHAEL J. TRASK  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
Signature of Registered Agent