

M1100000000574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

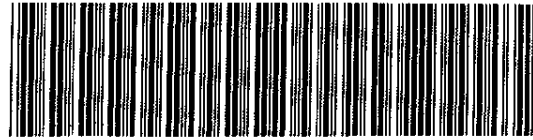
Special Instructions to Filing Officer:

L. SELLERS

6/25/11

EXAMINER

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35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAY 24 PM 12:56

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rewardix, LLC
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 Charest
Name of Person

Rewardix, LLC
Firm/Company

708 3rd Street North
Address

Jacksonville Beach, FL. 32250
City/State and Zip Code

Mcharest@Rewardix.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Charest at (904) 647-4065 Ext. 801
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 22, 2011

MICHAEL CHAREST
708 3RD STREET NORTH
JACKSONVILLE BEACH, FL 32250

SUBJECT: REWARDIX, LLC
Ref. Number: M11000000574

We have received your document for REWARDIX, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 911A00009866



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 5, 2011

MICHAEL CHAREST
708 3RD STREET NORTH
JACKSONVILLE BEACH, FL 32250

SUBJECT: REWARDIX, LLC
Ref. Number: M11000000574

We have received your document for REWARDIX, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 211A00011058

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

Pursuant to the provisions of sections 608.416 or 608.508, 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: Rewardix, LLC

2. (a) Principal office address of limited liability company: Rewardix, LLC

(Note: MUST BE STREET ADDRESS)

708 3rd Street North
Jacksonville Beach, FL 32250

(b) Mailing address of limited liability company: Rewardix, LLC

(Note: MAY BE POST OFFICE BOX)

708 3rd Street North
Jacksonville Beach, FL 32250

February 4, 2011
3. Date of filing/registration in Florida

M11000000574
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Michael Charest

Registered Office Address: 1858 Beachside Court
Atlantic Beach, FL 32233

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Michael Charest

NEW Registered Office Address: 708 3rd Street North
(MUST BE FLORIDA STREET ADDRESS) Jacksonville Beach, FL 32250

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.

Michael Charest
Signature of a member or authorized representative of a member

Michael Charest
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 608, 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.

Michael Charest
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
11 MAY 24 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FL 32314