

ML5000004115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. WARREN

MAR 08 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** All National Investment Options 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:

Calvin Gopaul  
Name of Person

Calvin Gopaul  
Firm/Company

625 Casa Loma Blvd Unit 904  
Address

Boynton Beach, FL 33435  
City/State and Zip Code

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

For further information concerning this matter, please call:

Vaidas Bonkys at ( 678 ) 503-5072  
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

**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: All National Investment Options LLC

2. (a) 10150 Highland Manor Dr (b) 10150 Highland Manor Dr

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Suite 200

Suite 200

Tampa, FL 33610

Tampa, FL 33610

05/26/15

M15000004115

3. Date of filing/registration in Florida

4. Document number

5. (a) Northwest Registered Agent LLC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3030 N Rocky Point Dr.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Suite 150A

Tampa, FL 33607

(b) Calvin Gopaul

Enter name of NEW Registered Agent and/or NEW Registered Office address:

Calvin Gopaul

NEW Registered Office Address:

625 Casa Loma Blvd Unit 904

Boynton Beach, FL 33435

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]  
Signature of a member or authorized representative of a member

Vaidas Bonkys

Printed or typed name of signer

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.

Tom Glover - Assistant Secretary  
Signature of Registered Agent

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