

M19 00000 5551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

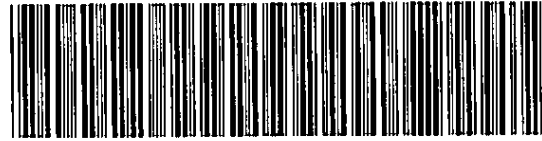
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS
FEB 08 2022



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 FEB -2 PM 1:35

SECRETARY OF STATE
TALLAHASSEE, FL

January 18, 2022

ANASTASIA DEGROAT 2ND ATTEMPT
642 NE 3RD AVE
FT LAUDERDALE, FL 33304

SUBJECT: PANGAEA PHARMACEUTICALS, LLC
Ref. Number: M19000005551

We have received your document for PANGAEA PHARMACEUTICALS, 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 FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 422A00001251

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 JAN 14 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FL

December 20, 2021

ANASTASIA DEGROAT
25 ROBERTS PITT DR
MONSEY, NY 10952

SUBJECT: PANGEA PHARMACEUTICALS, LLC
Ref. Number: M19000005551

We have received your document for PANGEA PHARMACEUTICALS, 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 FLORIDA CORPROATION, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 821A00030601

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PANGEA PHARMACEUTICALS, LLC
Name of Corporation

DOCUMENT NUMBER: M19000005551

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Anastasia Degroat
Name of Contact Person
Vcorp Services, LLC
Firm/Company
25 Robert Pitt Drive
Address
Monsey, NY 10952
City/State and Zip Code
adegroat@vcorp-services.com

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

For further information concerning this matter, please call:

Anastasia Degroat at (845) 4250077
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

**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: PANGEA PHARMACEUTICALS, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

642 NE 3RD AVENUE

642 NE 3RD AVENUE

FORT LAUDERDALE, FL 33304

FORT LAUDERDALE, FL 33304

06/06/2019

M19000005551

3. 06/06/2019 Date of filing/registration in Florida 4. M19000005551 Document number

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

LAVIOLA, ANTHONY

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

642 NE 3RD AVENUE

FORT LAUDERDALE, FL 33304

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

Vcorp Services, LLC

NEW Registered Office Address:

1200 South Pine Island Road

Plantation FL 33324

FILED
2022 FEB -2 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Anthony LaViola

Signature of a member or authorized representative of a member

Anthony LaViola

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.

Anthony LaViola

Signature of Registered Agent