

M2 00000000 480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

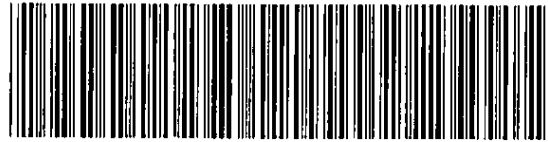
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

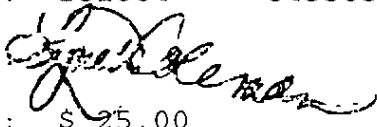
Office Use Only



700421345887

2024 FEB 29 PM 9:56  
2024 FEB 29 AM 11:23  
RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 281004 8435053  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

ORDER DATE : January 23, 2024  
ORDER TIME : 8:29 AM  
ORDER NO. : 281004-205  
CUSTOMER NO: 8435053

CHANGE OF AGENT

NAME: ZAPLABS LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller

2024 FEB 29 9:56

**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: ZAPLABS LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

175 PARK AVE.

MADISON, NJ 07940

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

175 PARK AVE.

MADISON, NJ 07940

01/10/2020

M20000000480

3. Date of filing/registration in Florida

4. Document number

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

CORPORATE CREATIONS NETWORK INC.

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

801 US HIGHWAY 1

NORTH PALM BEACH, FL 33408

(b) \_\_\_\_\_

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

Corporation Service Company

**NEW** Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

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.

Jill E. Cilmi  
Signature of a member or authorized representative of a member

JILL CILMI, AUTHORIZED PERSON

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.*

Grace E. Kirby  
Signature of Registered Agent

GRACE E. KIRBY, ASST. VICE PRESIDENT

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

**FILING FEE: \$25.00**