# M22000002892

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DATE:

09/14/22

NAME:

**AUTOMATION EMPIRE LLC** 

TYPE OF FILING: AMENDMENT

COST:

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RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

### **COVER LETTER**

Registration Section

TO:

**Division of Corporations** Automation Empire LLC SUBJECT: Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Raymond McGann, Esq. Name of Person Perlman, Bajandas, Yevoli & Albright, P.L. Firm/Company 200 South Andrews Avenue, Suite 600, Address Fort Lauderdale FL 33301 City/State and Zip Code Rmegann@pbyalaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Edward T. Yevoli, Esq. Area Code & Daytime Telephone Number Name of Person Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: □ \$60 Filing Fee. □\$25 Filing Fee ■ \$30 Filing Fee & ☐ \$55 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

State: Automation Empire LLC		····		
Enter new principal office address	s, if applicable:			
( <u>Principal office address</u> <u>MUST BE A STREET ADDRES</u>				
Enter new mailing address, if app (Mailing address MAY BE A POST OFFICE BOX			SSEL T	
2. The Florida document number	of this limited liability compa	my is: M22000002	892	
3. Jurisdiction of its organization	Defaware			
4. Date authorized to do business				
SECTION II (5-9 complete only	the applicable changes)			
5. New name of the limited liabil	ity company:(must contain "Li	mited Liability Co	mpany, " "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate copy of the written consent of the must contain "Limited Liability C	managers or managing menil	bers adopting the al	ousiness in Florida and attach a Iternate name. The alternate nam	
6. If amending the registered ager registered agent and/or the new re	nt and/or registered officer adorgistered office address here:	iress on our record	s, enter the name of the new	
Name of New Registered Agent:	Kiel J. Green, Esq.			
New Registered Office Address:	4700 Sheridan Street, Suite J.			
	Enter Florida Street Address			
	Hollywood, FL		, Florida 33021 Zip Code	
		City	Zip Code	
New Registered Agent's Signatur I hereby accept the appointment a the provisions of all statutes relat and accept the obligations of my p document is being filed to merely liability company has been notifie	is registered agent and agree ive to the proper and complet position as registered agent a reflect a change in the registe	to act in this capac e performance of n s provided for in C	ly duties, and I am familiar with hapter 605, F.S. Or, if this	

Kiel J. Green, Esq.

If Changing Registered Agent, Signature of New Registered Agent

	union enanges person, time or capacity in t	accordance with 605.0902 (1)(e), indicate that	
Title/ Capacity	<u>Name</u>	Address	Type of Action
MGR	Ronald Earley	1800 Second Street, Suite 972,	<b>=</b> Add
		Sarasota, Fl. 34236	□Remove
MGR	Cody Cornwell	1800 Second Street, Suite 972,	<b>=</b> Add
		Sarasota, FL 34236	2022 SEED OVE
MGR Automation Empire Holdings, LLC	Automation Empire Holdings, LLC	251 Little Falls Drive	AHASSEH)
	Wilmington, DE 19808		
			□Add
			□Remove
<del></del>			
aforementic	a certificate, if required: no more than 90 oned amendment(s), duly authenticated by under the law of which this entity is orga	the official having custody of records in the	Remove
	Ronald Earley	the authorized representative	

Filing Fee: \$25.00