

M2400007174

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : INC AUTHORITY, LLC
Account Number : I202400000004
Phone : (775)329-7721
Fax Number : (775)376-9207

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2024 JUN 10 PM 1:45
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: ROGER@IMEXBZ.COM

LLC REGISTERED AGENT CHANGE
IMEX GOLD, LLC

Certificate of Status	0
Certified Copy	0
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K. SALY

JUN 11 2024

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: IMEX GOLD, 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)

1058 NW 34th St.

142 North Linden Ave. 502

Miami, FL 33127

Orrville, Ohio 44667

05/14/2024

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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:

LEGALCORP SOLUTIONS, LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3440 W HOLLYWOOD BLVD, SUITE 415

HOLLYWOOD, FL 33021

(b)

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

Inc Authority RA

NEW Registered Office Address:

390 North Orange Ave., Ste 2300-N

Orlando, FL 32801

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.

Roger Taylor
Signature of member or authorized representative of a member

Roger Taylor

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.

Signature of Registered Agent

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

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2024 JUN 10 PM 1:45
STATE DEPT. OF STATE
TALLAHASSEE, FLORIDA