NO 00000 2915

(Re	equestor's Name)			
(Ad	idress)			
(Ad	idress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

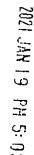
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MAR 02 2021 S. YOUNG



2021 JAN 19 PH 5-0-

COVER LETTER

TO:	Amendment Section Division of Corporations	
		·
SUB.	JECT: Lanakila Iki, Inc.	
	. Of Corporation	
DOC	UMENT NUMBER: N00000002915	
The e	enclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Pleas	e return all correspondence concerning this	s matter to the following:
Rashi	da Joemmankan	
Namo	of Contact Person	
Lanal	kila Iki, Inc.	
Firm/	Company	
1017	SW 15th Ave	
Addre	ess	
Fort I	auderdale, FL 33312	
City/S	State and Zip Code	
	rashidanjoe@gmail.com	
E-ma	il address: (to be used for future annua	report notification)
For fu	arther information concerning this matter,	please call:
Rashi	da Joemmankhan	at (305) 321-9034
	Name of Contact Person	at (305) 321-9034 Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address:
		Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

CR2E045 (04/13)

Tallahassee, FL 32314

STÄTEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of che	inge is submitted for a corporation	817.0502, 607.1508, or 617.1508, Florida Statute n organized under the laws of the State of <u>Flor</u> r registered agent, or both, in the State of Florida	<u>ida</u>	
	the corporation: Lanakila lki, Inc.	registerea agom, or nom, in the state of r tortaa		
2. The principal	office address: 1017 SW 15th Ave	e Fort Lauderdale, FL 33312		
3. The mailing a	ddress (if different):			
4. Date of incor	poration/qualification: 05/01/2000	Document number: N00000002915		
5. The name and		stered agent and registered office on file with the	<u>-</u>	
	Victor Simmons			
	2331 NW 33rd St Unit 316			
	Oakland Park, FL 33309		20	
6. The name and (if changed):		red agent (if changed) and /or registered office	2021 JAN 19	
	Rashida Joemmankhan		9 PH	
	1017 SW 15th Ave		ñi . ⊒:	
	Fort Lauderdale, FL 33312	P.O. Box NOT acceptable	03	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its regis	tered agent.	
Such change wa authorized by the	as authorized by resolution duly a ne board, or the corporation has b	adopted by its board of directors or by an office seen notified in writing of the change.	rso	
Wie t		Victor Simmons, 2020 board of directors		
Signatu	re of an officer or director	Printed or typed name and title		
I further agrée : of my duties, an document is hei	the appointment as registered as to comply with the provisions of a l am familiar with and accept to glied merely to reflect a chang been notified in writing of this c	gent and agree to act in this capacity, all statutes relative to the proper and complete p the obligation of my position as registered agen ge in the registered office address, I hereby conf hange.	performance t. Or, if this irm that the	
KAMM		01/08/2021		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Т	ped or Printed Name	_		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *