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2015-06-19 13:31:32 (GMT)

18888884479 From: Luis Silva

5/18/2015

P01000062649

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : SILVAS FINANCIAL SERVICES, L.L.C.
Account Number : I20020000100
Phone : (305)944-9755
Fax Number : (888)401-1914

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

Email Address: _____

REGISTERED AGENT CHANGE
LASS TECHNOLOGY, CORP.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PTA Change

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Corporate Filing Menu

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2015-06-19 14:31:32 (GMT)

1868984479 From: Luis Silva

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **LASS TECHNOLOGY, CORP**
Name of Corporation

DOCUMENT NUMBER: **P01000062649**

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:

DANNY CHASE
Name of Contact Person

Firm/Company
9900 STIRLING ROAD SUITE 404A
Address
COOPER CITY, FL 33024
City/State and Zip Code

srinformation99@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANNY CHASE
Name of Contact Person or ()
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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2015-06-19 14:31:32 (GMT)

18888984479 From: Luis Silva

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LASS TECHNOLOGY, CORP.
2. The principal office address: 9900 STIRLING ROAD SUITE 404A
COOPER CITY, FL 33024
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/11/2005 Document number: P01000062649
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

DANNY CHASE15970 W. SR 84 STE 238SUNRISE, FL 33326

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

DANNY CHASE9900 STIRLING ROAD SUITE 404AP.O. Box NOT acceptableCOOPER CITY, FL 33024

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of officer or directorDANNY CHASE

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent6-19-2015
Date

If signing on behalf of an entity:

DANNY CHASE

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2F045 (03/12)

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