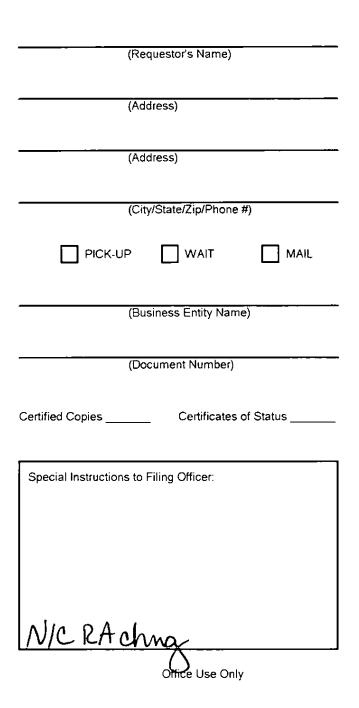
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October 16, 2018

LANE NUSSBAUM FLOORING INC. C/O P.O. BOX 5235 DELTONA, FL 32728 US

SUBJECT: LANE NUSSBAUM FLOORING INC.

Ref. Number: P03000152576

In a recent audit of our records, we have determined that the above named entity has designated itself as Registered Agent.

The purpose of this letter is to advise you a business entity may not serve as its own Registered Agent. We are asking you to designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please complete the enclosed Statement of Registered Office or Registered Agent form for filing at no charge. Return the completed form to my personal and confidential attention. The address is listed below.

This letter is to be considered your 60 day notice that your entity will be subject to administrative dissolution or revocation if this error is not corrected by December 16, 2018.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Letter Number: 618A00021101

Stacy Prather Regulatory Specialist III

COVER LETTER

Division of (
SUBJECT: L	ane <u>Ņ</u>	Jussbaum	Flooring Inc.
		Name of Lir	nited Liability Cor ny any
Dear Sir or Madam:			
The enclosed Registo	ered Agent/Re	gistered Office Char	nge and fee(s) are submitted for filing.
Please return all corr	espondence co	oncerning this matter	r to the following:
	Name of P	N ussbaun erson	<u>^</u>
	Firm/Com	pany	
13	07 U. Address	ctoria H.	11s Dr N
Deland,	FL City/State and	32724 Zip Code	
Lane H E-mail address	N P M	S N . Co M or future annual repo	ort notification)
For further informati	on concerning	this matter, please of	call:
	JUSSB ac) m at (Area Code & Daytime Telephone Number
Registration Division of C Clifton Build 2661 Execut	Corporations	cle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is	a check for th	e following amoun	t:
🗅 \$25 Filing	g Fee		□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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.	Na	ime of the limited liability company: <u>Lane Ni</u>	<u>055bau,</u>	5 Floor.	19 Inc.			
2	(a)		(b)		J			
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_	lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
			_	PU3	W0152	15	716	
3.		Date of filing/registration in Florida	4.	Docum	ent number			
5. (a	(a)	Lane Nussbaum						
		Registered Agent and Registered Office shown on the records of the	of State:	Sissi TA	20181			
		Registered Office Address (MUST BE FLORIDA STREET ADI		NOV -5				
					S CET S	AH 11: 08		
(h	(b)	Lane Nussbaum			72	. 0		
	(0)	Enter name of NEW Registered Agent and/or NEW Registered Of	fice address:		ָרַיַ	; c o		
		NET 1307 Victoria Hill Dr						
		NEI 1307 Victoria Hilleder Deland, FL 32724						
		, FL						
the age	e cha ent w is/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the vill be identical. Or, in the ease of a Florida limited liabilities authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the line	e registered lity compar he limited l	I office and the ny, it is hereby liability compa	e business office (of the re he chan	gistered ge(s)	
_		Zan MM	La	ne Nuss	b gom or typed name of sign			
	•	dre of a member of authorized representative of a member						
pro the to	ovisi 2 obli merc	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete perigations of my position as registered agent as provided felly reflect a change in the registered office address. I her I in writing of this change.	to act in the rformance or in Chapt reby confirt	is capacity. I of my duties, i ter 605, F.S. O n that the limi	further agree to c ind I am familiar Or, if this docume ted liability comp	comply with an nt is bei any has	with the d accept ng filed been	
Si	gnardi	re of Register d Agent						