

PO6000123207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

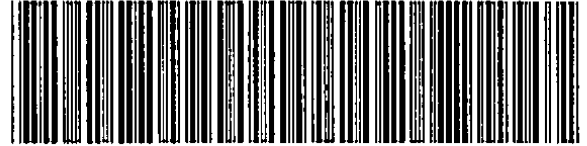
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

[Handwritten signature]
6/16

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Registered Agent Address Change
Name of Corporation

DOCUMENT NUMBER: P06000123207

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:

Kimberly S Laudat

Name of Contact Person

Labels and More, Inc.

Firm/Company

448 Commerce Way, Unit 112

Address

Longwood, FL 32750

City/State and Zip Code

kimlaudat@outlook.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly S Laudat

Name of Contact Person

at (407) 2190960

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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SECRETARY OF STATE
TALLAHASSEE, FL

**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: Labels and More, Inc.
2. The principal office address: 448 Commerce Way, Unit 112
Longwood, FL 32750
3. The mailing address (if different): 448 Commerce Way, Unit 112
4. Date of incorporation/qualification: 09/25/2006 Document number: P06000123207
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)

Kimberly S Laudat

448 Commerce Way, Unit 112

Longwood, FL 32750

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

Kimberly S Laudat

4345 Kaycees Way

P.O. Box NOT acceptable

New Smyrna Beach, FL 32168

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.

Kimberly S Laudat
Signature of an officer or director

Kimberly S Laudat, President and Owner

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.

Kimberly S Laudat
Signature of Registered Agent

04/20/2022

Date

If signing on behalf of an entity:

Kimberly S. Laudat
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
CR2E045 (04/13)