

P09000035303

(Requestor's Name)

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T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LMG Glass and Mirror Inc.

Name of Corporation

DOCUMENT NUMBER: P09000035303

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:

Keith Leombruno

Name of Contact Person

LMG Glass and Mirror Inc.

Firm/Company

1027 W. Lancaster Road

Address

Orlando, FL 32809

City/State and Zip Code

keith@lmgglassandmirror.com

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

For further information concerning this matter, please call:

Keith Leombruno

Name of Contact Person

at (407) 648-0844

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 25, 2016

RECEIVED
JUN 10 2016

BY:

KEITH LEOMBRUNO
1027 W LANCASTER RD
ORLANDO, FL 32809

SUBJECT: LMG GLASS AND MIRROR, INC.
Ref. Number: P09000035303

We have received your document for LMG GLASS AND MIRROR, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please 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 return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 416A00011104

RECEIVED

16 JUN 27 PM 4:02
REGISTRY OF
CORPORATIONS
ASSISTANT
TALLAHASSEE, FLORIDA

**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: LMG Glass and Mirror Inc.
2. The principal office address: 1027 W. Lancaster Road Orlando, FL 32809
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 04/20/2009 Document number: P000035303
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)

LMG Glass and Mirror Inc.
3601 Vineland Road Suite 15
Orlando, FL 32811

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

Pam Leombruno
12235 Laurel Mary Jane Rd
P.O. Box NOT acceptable
Orlando, FL 32832

2018 JUN 30 A 7:33

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] Keith Leombruno
Signature of an officer or director 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.

Pam Leombruno
Signature of Registered Agent

May 10th, 2018
Date

If signing on behalf of an entity:

Typed or Printed Name

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