## P14000025863

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ac                     | ldress)            |           |
| (Ac                     | ddress)            |           |
| (Ci                     | ty/State/Zip/Phone | #)        |
| PICK-UP                 | WAIT,              | MAIL      |
| (Ві                     | usiness Entity Nam | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
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|                         |                    |           |
| ı                       |                    |           |
| :                       | Office Use Only    | <b>v</b>  |



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11/26/14--01007--018 \*\*35.00

FILED SCORETARY OF STATE DIVISION OF CORPORATIONS

C.L. 30-14



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 5, 2014

JOSEPH B LANIER / 304 LANSERV INC 5850 ORANGE DRIVE BLDG A DAVIE, FL 33314 US

SUBJECT: 304 LANSERV, INC. Ref. Number: P14000025863

We have received your document for 304 LANSERV, 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):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The registered agent must sign accepting the designation.

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.

Carolyn Lewis Regulatory Specialist II

Letter Number: 114A00025705

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT. 304 LanServ Inc

Name of Corporation

DOCUMENT NUMBER: P14000025863

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:

Joseph B Lanier

Name of Contact Person

304 LanServ Inc

Firm/Company

5850 Orange Drive; Bldg A

Address

**Davie, FL 33314** 

City/State and Zip Code

Britt.Lanier@twomen.com

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

For further information concerning this matter, please call:

Joseph B Lanier

...954

791-8092

Name of Contact Person

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

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

| •                                                       | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,<br>nge is submitted for a corporation organized under the laws of the State of Florida                                                                                                                                                                                                                           | this            |                            |
|---------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------|
| • .                                                     | r to change its registered office or registered agent, or both, in the State of Florida.                                                                                                                                                                                                                                                                                                             |                 | -                          |
| 1. The name of t                                        | he corporation: 304 LanServ Inc                                                                                                                                                                                                                                                                                                                                                                      |                 |                            |
| 2. The principal                                        | office address: 5850 Orange Drive; Bldg A Davie, FL 33314                                                                                                                                                                                                                                                                                                                                            |                 |                            |
|                                                         |                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                            |
| 3. The mailing a                                        | ddress (if different):                                                                                                                                                                                                                                                                                                                                                                               |                 |                            |
| 4. Date of incorp                                       | poration/qualification: 03/20/2014 Document number: P140000258                                                                                                                                                                                                                                                                                                                                       | 363             |                            |
| 5. The name and                                         | street address of the current registered agent and registered office on file with the trnent of State: (If resigned, enter resigned)                                                                                                                                                                                                                                                                 |                 |                            |
|                                                         | Joseph B Lanier                                                                                                                                                                                                                                                                                                                                                                                      |                 |                            |
|                                                         | 4430 NE 24 Terrace                                                                                                                                                                                                                                                                                                                                                                                   |                 |                            |
|                                                         | Lighthouse Point, FL 33064                                                                                                                                                                                                                                                                                                                                                                           | 14              | ISIAIG<br>138              |
| 6. The name and (if changed):                           | street address of the new registered agent (if changed) and /or registered office                                                                                                                                                                                                                                                                                                                    | 4 DEC 23        | ON OF C                    |
|                                                         | Joseph B Lanier                                                                                                                                                                                                                                                                                                                                                                                      | PH              | EU<br>Y OF STAT<br>ORPORAL |
|                                                         | 5850 Orange Drive; Bldg A                                                                                                                                                                                                                                                                                                                                                                            | ?:<br>•         | RATE                       |
|                                                         | P.O. Box NOT acceptable  Davie, FL 33314                                                                                                                                                                                                                                                                                                                                                             | _               | 70                         |
| The street addre                                        | ess of its registered office and the street address of the business office of its registe be identical.                                                                                                                                                                                                                                                                                              | red age         | ent,                       |
| Such change was authorized by                           | s authorized by resolution duly adopted by its board of directors or by an officer se board, or the corporation has been notified in writing of the change.                                                                                                                                                                                                                                          | 0               |                            |
| (15)                                                    | Sosph B Land Properties of typed name and tiple                                                                                                                                                                                                                                                                                                                                                      | -5/2/1          | ent                        |
| I further agree i<br>performance of<br>agent. Or, if th | the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as regists document is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change. | stered<br>ss, I |                            |
| # :Sig                                                  | nature of Registered Agont J Date                                                                                                                                                                                                                                                                                                                                                                    |                 | _                          |
|                                                         | half of an entity:                                                                                                                                                                                                                                                                                                                                                                                   |                 |                            |
| T                                                       | yped or Printed Name                                                                                                                                                                                                                                                                                                                                                                                 |                 |                            |

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