

P15000028/00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400272336224

05/05/15--01031--002 **35.00

15 MAY -5 PM 2:17
DIVISION OF REVENUE

C.L.
5-12-15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LuxLoanz Inc.

Name of Corporation

DOCUMENT NUMBER: P15000028100

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:

Marca Peterson

Name of Contact Person

LuxLoanz Inc.

Firm/Company

1395 Brickell Avenue, Suite 900

Address

Miami, FL 33131

City/State and Zip Code

marca@luxloanz.com

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

For further information concerning this matter, please call:

Marca Peterson

Name of Contact Person

at (917) 330 7046

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**

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: LuxLoanz Inc.
2. The principal office address: 1770 Anzle Ave, Winter Park, FL 32789
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/25/2015 Document number: P15000028100

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)

Mark Michel

1779 Anzle Ave

Winter Park, FL 32789

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

Marca Peterson

1395 Brickell Avenue, Suite 900

P.O. Box NOT acceptable

Miami, FL 33131

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.

Marca Peterson
Signature of an officer or director

Marca Peterson, CEO

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.

Marca Peterson
Signature of Registered Agent

27 April 2015

Date

If signing on behalf of an entity:

Marca Peterson

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 (03/12)

15 MAY -5 PM 2:17

RECEIVED
DIVISION OF CORPORATIONS
MAY 15 2015