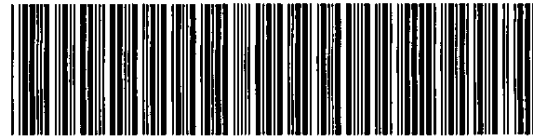


L10000064481



200299342862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

05/30/17--01042--016 \*\*25.00

Special Instructions to Filing Officer:

Office Use Only

17 JUN 12 AM 10:49

17 JUN 12 AM 10:49

O SIMMONS  
JUN 13 2017



## Palmetto, Mollo, Molinaro & Passarello, LLP

CERTIFIED PUBLIC ACCOUNTANTS

91 BROADHOLLOW ROAD • MELVILLE, NY 11747-2500

TELEPHONE: 631-761-8989 • FAX: 631-761-8993

Email: [info@pmmllp.com](mailto:info@pmmllp.com)

# Fax

<b>To:</b> Division of Corporations	<b>From:</b> Simfed Investments LLC (Michael)
<b>Fax:</b> (850) 245-6014	<b>Pages:</b> 3
<b>Phone:</b>	<b>Date:</b> 6/9/2017
<b>Re:</b> Resubmission of Registered Agent Change Form	<b>CC:</b>

To whom it may concern:

This fax contains the submission of statement of change of registered office or registered agent or both for limited liability company. The filing fee of \$25.00 was paid. If there are any questions please contact us by phone, (631) 761-8989.

The information contained in this facsimile is intended only for the use of the individual or entity to which it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify the sender immediately by telephone, and return the original to the above address by mail.

IRS regulations require us to advise you that, unless otherwise specifically noted, any federal tax advice in this communication (including any attachments, enclosures, or other accompanying materials) was not intended or written to be used, and it cannot be used, by any taxpayer for the purpose of avoiding penalties; furthermore, this communication was not intended or written to support the promotion or marketing of any of the transactions or matters it addresses.

Thank you!

If you do not receive all of the pages indicated, please call us immediately.

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SIMFED INVESTMENTS, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SEBASTIAN PASSARELLO, CPA

Name of Person

PALMETTO, MOLLO, MOLINARO & PASSARELLO

Firm/Company

91 BROADHOLLOW ROAD

Address

MELVILLE, NY 11747

City/State and Zip Code

SPASSARELLO@PMMPLLP.COM

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

For further information concerning this matter, please call:

SEBASTIAN PASSARELLO

Name of Person

at ( 631 ) 761-8989

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: SIMFED INVESTMENTS, LLC

2. (a) 91 BROADHOLLOW ROAD (b) 91 BROADHOLLOW ROAD  
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  
MELVILLE, NY 11747 MELVILLE, NY 11747

3. 6/18/2010 4. L10000064481  
Date of filing/registration in Florida Document number

5. (a) SAEZ, PEDRO P.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
777 BRICKELL AVENUE, SUITE 1110  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
MIAMI, FL 33131

(b) KANTOR, PALMETTO, ZEIGLER, CHAMBERLAIN & PERRELLA, PL  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
1000 NW 85TH STREET, SUITE 201  
NEW Registered Office Address:  
FT. LAUDERDALE, FL 33309

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member SIMONETTA BAGON  
Printed or typed name of signee

*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 obligations of my position as registered agent as provided for in Chapter 603, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
 FILING FEE: \$25.00

17 JUN 12 AM 10:49