

L11000133737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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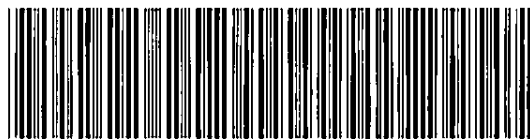
(Business Entity Name)

(Document Number)

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17 OCT 13 PM 4:37

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Signature]
10/16/13

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 860145 9029A

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE : October 13, 2017

ORDER TIME : 2:29 PM

ORDER NO. : 860145-005

CUSTOMER NO: 9029A

CHANGE OF AGENT

NAME: STLGO REALTY GROUP LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XXX _____ PLAIN STAMPED COPY

CONTACT PERSON: Roxanne Turner -- EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STLGO REALTY GROUP 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:

HOFIT LOTTENBERG ESQ.

Name of Person

FRANK, WEINBERG & BLACK, P.L.

Firm/Company

7805 SW 6th Court

Address

Plantation, FL 33324

City/State and Zip Code

hlottenberg@fwblaw.net

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

For further information concerning this matter, please call:

SHALOM HANOH

at (954)

338-6179

Name of Person

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: STLGO REALTY GROUP LLC

2. (a) 5846 South Flamingo Road

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

Cooper City, FL 33330

11/28/2011

3. **Date of filing/registration in Florida**

(b) 5846 South Flamingo Road

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

BOX 189

Cooper City, FL 33330

L-11000133737

4. Document number

5. (a) Shalom Hanoh

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5846 South Flamingo Road

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Cooper City : FL 33330

(b) Hofit Lottenberg, Esq.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

Frank, Weinberg & Black, P.L.

NEW Registered Office Address:

7805 SW 6th Court

Plantation . . . FL 33324

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.

Shalom Hanoh

Signature of a member or authorized representative of a member

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 605, 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

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17 OCT 13 AM 8:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA