

L13000119137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

5/2/18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ST. TROPEZ ISLAND 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:

CHRISTIAN FRONTINO BUBZI

Name of Person

Firm/Company

250 SUNNY ISLES BLVD. UNIT 1502

Address

SUNNY ISLES BEACH, FL, 33160.

City/State and Zip Code

CFBUBZI96@GMAIL.COM

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

For further information concerning this matter, please call:

CHRISTIAN BUBZI

Name of Person

at (786) 405 2000

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

2018 APR 30 12:31
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 16, 2018

CHRISTIAN FRONTINO BUZZI
250 SUNNY ISLES BLVD
UNIT 1502
SUNNY ISLES BEACH, FL 33160

SUBJECT: ST. TROPEZ ISLAND LLC
Ref. Number: L13000119137

We have received your document for ST. TROPEZ ISLAND LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Writing on section 5b is illegible, please revise.

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) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 018A00007578

RECEIVED

2018 APR 30 PM 2:42

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2018 APR 30 PM 12:31
TALLAHASSEE, FLORIDA

FILED

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: ST. TROPEZ ISLAND LLC

2. (a) 250 SUNNY ISLES BLVD UNIT 1502 (b) SAME AS OFFICE

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

SUNNY ISLES BEACH, FL, 33160

3. AUGUST 22, 2013

Date of filing/registration in Florida

4. L13000119137

Document number

5. (a) FGC Corporate Advisors LLC

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

900 Brickell Key Blvd

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Ste 1703

Miami

FL 33131

(b) CHRISTIAN FRONTINO BUZZI

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

250 SUNNY ISLES BEACH BLVD, UNIT 1502

NEW Registered Office Address:

SUNNY ISLES BEACH

FL 33160

-D CHRISTIAN FRONTINO BUZZI

-D 250 SUNNY ISLES BLVD, UNIT 1502, SUNNY ISLES BEACH, FL, 33160

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]
Signature of a member or authorized representative of a member

CLAUDIO E. P. BUZZI

Printed or typed name of signer

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]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00