

PD8000000588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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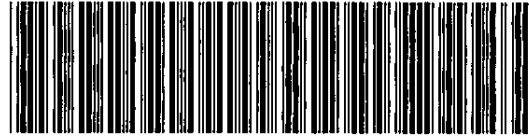
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
13 OCT 21 AM 11:39

OCT 28 2013
T. CARTER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 25, 2013

RUSSELL BERMAN
THE LAW OFFICES OF BERMAN & BERMAN, P.A.
PO BOX 272789
BOCA RATON, FL 33427

SUBJECT: THE LAW OFFICES OF BERMAN & BERMAN, P.A.
Ref. Number: P08000000588

We have received your document for THE LAW OFFICES OF BERMAN & BERMAN, P.A. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

This document is illegible, you cannot read the writing.

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 413A00022594

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Law Offices of Berman + Berman PA
Name of Corporation

DOCUMENT NUMBER: _____

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:

Russell F. Berman
Name of Contact Person

The Law Offices of Berman + Berman PA
Firm/Company

2500 N. Military Trail Suite 1160
Address

Boca Raton, FL 33431
City/State and Zip Code

rberman@thebermanlawgroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Russell Berman at (561) 826-5200
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**

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Law Offices of Berman + Berman PA
2. The principal office address: 2500 N. Military Trail, Suite 160
Boca Raton, FL 33431
3. The mailing address (if different): P.O. Box 272789
Boca Raton, FL 33427
4. Date of incorporation/qualification: 01/02/2008 Document number: PO80000000588

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)

10065 Avenida Del Rio
Delray Beach, FL 33446
Russell F Berman

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

Zachary West
805 NW 13th St
Gainesville, FL 32601
P.O. Box NOT acceptable

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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.

[Signature]
Signature of an officer or director

Russell Berman
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.

[Signature]
Signature of Registered Agent

10/15/13
Date

If signing on behalf of an entity:

Zachary West
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)