553365

(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



800320785058

11/19/18--01025--003 **35.00

2018 NOV 19 AMII: 46
SECRETARY OF STATE
AND SEFFE FLORID.

HOY 23 2018 CARCHAIR

COVER LETTER

TO:

Amendment Section Division of Corporations

MARC RHEINGOLD & ASSOCIATES, INC.

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:

MARC RHEINGOLD

Name of Contact Person

MARC RHEINGOLD & ASSOCIATES, INC.

Firm/Company

1950 N. COMMERCE PARKWAY SUITE 1

Address

WESTON, FL 33326

City/State and Zip Code

MARC@MARCRHEINGOLD.COM

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

For further information concerning this matter, please call:

MARC RHEINGOLD

Name of Contact Person

19 MIN 19 MIN 1. 1.60

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

statement of cha	provisions of sections 607.0502, 617. inge is submitted for a corporation or r to change its registered office or reg	ganized under the laws of the State o	<i>f</i> ` <u>FL</u>
1. The name of •2. The principal	the corporation: MARC RHEING office address: 1840 MAIN STI	GOLD & ASSOCIATES, IN	
<u></u>	iddress (if different);		
4. Date of incor	poration/qualification: 05/17/199	1Document number: S533	365
5. The name and	d street address of the current register rtment of State: (If resigned, enter res	ed agent and registered office on file	with the
	MARC RHEINGOLD		_
	1840 MAIN STREET Sui	te 202	_
	WESTON, FL 33326		_
6. The name and (if changed):	I street address of the new registered	agent (if changed) and /or registered o	
	MARC RHEINGOLD		SECS
	1950 N. Commerce Parky	way Suite 1	2018 NOV 19 SECRETAR TALLAHASS
	WESTON, FL 33326	NOT acceptable	9 AMII
The street addras changed will	ess of its registered office and the str be identical.	eet address of the business office of	
Such change w authorized by	is amborized by resolution duly adopte board, or the corporation has been	oted by its board of directors or by an inotified in writing of the change.	n officer so
	or of an efficer or director	Marc Rheingold, PRES	
I hereby accept I further agree performance of	the appointment as registered agent to comply with the provisions of all s my duties, and I am familiar with an is document is being filed merely to that the oprporation has been notific	and agree to act in this capacity, statutes relative to the proper and cold accept the obligation of my position	omplete on as registered
111		11/14/2018	
If signing on be	half of an entity	Date	
Marc Rheir			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *