

211000068411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

O: Registration Section  
Division of Corporations

SUBJECT: Sundarsingh Law, P.L.  
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:

Mandell Sundarsingh  
Name of Person

Sundarsingh Law, P.L.  
Firm/Company

1400 Centrepark Blvd, Suite 603  
Address

West Palm Beach, FL 33401  
City/State and Zip Code

Mandell@creativelaw.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
Name of Person Area Code & Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

ursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company  
mits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company: Sundarsingh Law. P.L.

(a) 1400 Centrepark Blvd (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Suite 603

West Palm Beach, FL 33401

6/13/11

Date of filing/registration in Florida

4.

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Document number

(a) Mandell Sundarsingh  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

4440 PGA Blvd, Suite 500

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Palm Beach Gardens.

FL 33410

(b) Mandell Sundarsingh  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1400 Centrepark, Suite 603

NEW Registered Office Address:

West Palm Beach FL 33401

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

M. Sundarsingh  
Signature of a member or authorized representative of a member

Mandell Sundarsingh  
Printed or typed name of signee

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the  
ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept  
2 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed  
merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been  
ified in writing of this change.

M. Sundarsingh  
Signature of Registered Agent

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

FILING FEE: \$25.00