

A9700001281  
Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : BARNETT, KIRKWOOD, KOCH, LONG & FOSTER, P.A.  
Account Number : 072731001155  
Phone : (813)253-2020  
Fax Number : (813)251-6711

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
MEZRAH FAMILY PARTNERSHIP, LTD.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

APPROVED  
AND  
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2022 MAY -9 PM 3:11

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**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. MEZRAH FAMILY PARTNERSHIP, LTD.

Name of Limited Partnership or Limited Liability Limited Partnership

2. 06/10/1997

Date of filing/registration in Florida

3. A97000001281

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Todd M. Mezrah

Name

5350 W. Kennedy Blvd.

Address

Tampa, FL 33609

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Lee A. Mezrah

Name

5350 W. Kennedy Blvd.

Florida street address (P.O. Box not acceptable)

Tampa

FL 33609

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

LEE MEZRAH, LLC

5/9/2022

X

By [Signature]

Lee Mezrah, Manager

Signature of General Partner

*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.*

X

[Signature]

5/9/2022

Signature of Registered Agent

LEE MEZRAH

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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