

A990000001021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

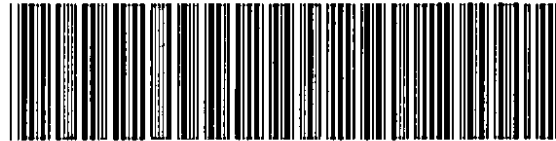
(Document Number)

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APR 3 - 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LGL REALTY, LTD.

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:

CLAUDIA PEREIRA

Name of Person

LGL REALTY LTD

Firm/Company

1601 BELVEDERE RD, SUITE S-202

Address

WEST PALM BEACH, FLORIDA 33406

City/State and Zip Code

CPEREIRA@L2GHOLDINGS.COM

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

For further information concerning this matter, please call:

CLAUDIA PEREIRA

Name of Person

561

at (

284-2968

) _____
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

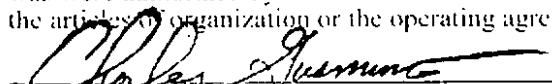
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

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: LGL REALTY, LTD
2. (a) 1601 BELVEDERE RD
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
SUITE S-202
WEST PALM BEACH, FL 33406
- (b) 1601 BELVEDERE RD
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
SUITE S-202
WEST PALM BEACH, FL 33406
3. 11/01/2022 Date of filing/registration in Florida
4. A99000001021 Document number
5. (a) GUSMANO, CHARLES
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1601 BELVEDERE RD
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
SUITE S-202
WEST PALM BEACH, FL 33406
- (b) CHARLES LOMANGINO
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1601 BELVEDERE RD
NEW Registered Office Address:
SUITE S-202
WEST PALM BEACH, FL 33406

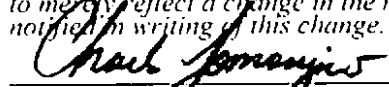
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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered 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 of a member or authorized representative of a member

Charles Gusmano
Printed or typed name of signee

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 of Registered Agent



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 10, 2023

CLAUDIA PEREIRA
1601 BELVEDERE RD
SUITE S-202
WEST PALM BEACH, FL 33406

SUBJECT: LGL REALTY, LTD.
Ref. Number: A99000001021

We have received your document for LGL REALTY, LTD. 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 form you submitted is for a STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LLC, but your entity is a LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 623A00005695

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