

L010000014839

North Shore Capital Management  
11621 Kew Gardens Avenue  
Suite 210  
Palm Beach Gardens, FL 33410

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. NORTH SHORE CAPITAL MANAGEMENT, LLC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

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\*\*\*\*\*75.00 \*\*\*\*\*25.00

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 AUG 26 PM 4:11

Examiner's Initials

30



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

August 21, 2002

NORTH SHORE CAPITAL MANAGEMENT  
SUITE 210  
11621 KEW GARDENS AVENUE  
PALM BEACH GARDENS, FL 33410

SUBJECT: NORTH SHORE CAPITAL MANAGEMENT, L.L.C.  
Ref. Number: L01000014839

We have received your document for NORTH SHORE CAPITAL MANAGEMENT, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 502A00049140

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DIVISION OF CORPORATIONS  
02 AUG 26 PM 4:11

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

*Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: North Shore Capital Management, LLC

2. The mailing address of the limited liability company is: 11621 Kew Gardens Avenue  
Suite #210, Palm Beach Gardens, FL 33410

Aug 29, 2001

L 01000014839

3. Date of filing/registration in Florida

4. Document number

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

CT Corporation System

Name

1200 S. Pine Island

Address

Plantation, FL 33324

City, State and Zip

6. The name and address of the new registered agent and/or office:

11621 Kew Gardens Avenue, Suite 210

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

Palm Beach Gardens, FL 33410

City, State and Zip

Doug Reich

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.

X [Signature]  
(Signature of a member or authorized representative of a member)

DOUG REICH

(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 608, 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.*

X [Signature]  
(Signature of Registered Agent)

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

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02 AUG 2001 08:11