

LO2000016788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

(Business Entity Name)

(Document Number)

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Certificates of Status \_\_\_\_\_

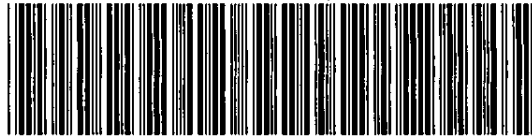
Special Instructions to Filing Officer:

**A. LUNT**

SEP 30 2008

**EXAMINER**

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2008 SEP 29 P 2:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MSPL PROPERTIES, LLC  
(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:

Paul and Lauren Weinstein  
(Name of Person)

MSPL Properties, LLC  
(Firm/Company)

14426 Cypress Island Circle  
(Address)

Palm Beach Gardens, Florida 33410  
(City/State and Zip Code)

For further information concerning this matter, please call:

Paul and Linda Weinstein at ( 561 ) 624-7116  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. Name of the limited liability company: MSPL Properties, LLC

2. (a) Principal office address of limited liability company: 14426 Cypress Island Circle  
(Note: **MUST BE STREET ADDRESS**) Palm Beach Gardens, Florida 33410

(b) Mailing address of limited liability company: 14426 Cypress Island Circle  
(Note: **MAY BE POST OFFICE BOX**) Palm Beach Gardens, Florida 33410

07/02/2002  
3. Date of filing/registration in Florida

L02000016788  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Department of State:

Registered Agent: Michael G Cassatly

Registered Office Address: 4 West Riverside Drive  
Jupiter, Florida 33469

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

**NEW** Registered Agent: Paul R. Weinstein

**NEW** Registered Office Address: 14426 Cypress Island Circle  
(**MUST BE FLORIDA STREET ADDRESS**) Palm Beach Gardens, FL 33410

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.

Paul Weinstein  
(Signature of a member or authorized representative of a member)

PAUL WEINSTEIN  
(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.*

Paul Weinstein  
(Signature of Registered Agent)

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**  
**FILING FEE: \$25.00**