

L05 000071203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

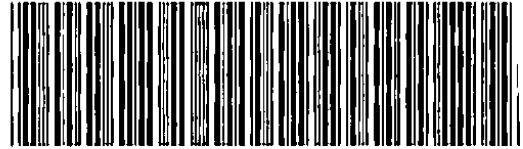
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SULKER

OCT 21 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ILS GROUP 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:

Susy Cabrera, Esq.

Name of Person

Independent Living Systems, LLC

Firm/Company

5200 Blue Lagoon Drive, Suite 500

Address

Miami, FL 33126

City/State and Zip Code

legal@ilshealth.com

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

For further information concerning this matter, please call:

Susy Cabrera

at (305)

262-1292 Ext. 106456

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

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
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 Florida.

1. Name of the limited liability company: ILS Group LLC
2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
5200 Blue Lagoon Drive, Suite 500
Miami, FL 33126
- (b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE)
5200 Blue Lagoon Drive, Suite 5
Miami, FL 33126
3. 07/14/2005 Date of filing/registration in Florida
4. L05000071203 Document number

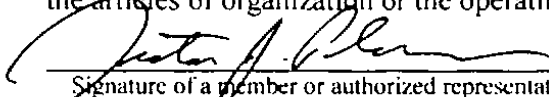
5. (a) David C. Ristaino
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
5200 Blue Lagoon Drive, Suite 500
Miami, FL 33126

- (b) Susy Cabrera, Esq.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
ILS Group LLC
NEW Registered Office Address:
5200 Blue Lagoon Drive, Suite 500
Miami, FL 33126

2019 OCT 1 - 2
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change 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

Nestor J. Plana, Manager

Printed or typed name of signer

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 all 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 notified in writing of this change.


Signature of Registered Agent

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