

L05000122213

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Address Change

SUBJECT: Savage & Atlass, P.L.
Name of Limited Liability Company

Dear Sir or Madam:

LD5000122213

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jena Rissman Atlass

Name of Person

Savage & Atlass, P.L.

Firm/Company

3999 Sheridan Street, Suite 200

Address

Hollywood, FL 33021

City/State and Zip Code

jatlass@savageatlass.com

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

For further information concerning this matter, please call:

Jena Rissman Atlass

Name of Person

at (954)

985-1005

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