

LO6000036097

Palma Bella Development, LLC
(Requestor's Name)

2999 N.E 191st PH#2
(Address)

(Address)

Aventura, FL 33180
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

Palma Bella Development, LLC
(Business Entity Name)

LO6000036097
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Registered agent

Dade County Corporate Agents, Inc
18901 NE 29th Avenue Suite 100
Aventura, FL 33180

Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 DEC 15 PM 1:54

12/19



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2006

YIZHAK TOLEDANO
2999 NE 191 STREET, PH #2
AVENTURA, FL 33180

SUBJECT: PALMA BELLA DEVELOPMENT LLC
Ref. Number: L06000036097

We have received your document for PALMA BELLA DEVELOPMENT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

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) 245-6853.

Leslie Sellers
Document Specialist

Letter Number: 106A00068763

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Palma Bella Development, 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:

Yizhak Toledano
(Name of Person)

Palma Bella Development, LLC
(Firm/Company)

2999 N.E. 191st PH#2
(Address)

Aventura, FL 33180
(City/State and Zip Code)

For further information concerning this matter, please call:

Yizhak Toledano at (305) 933-4646
(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 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: Palma Bella Development, LLC
2. The mailing address of the limited liability company is: 2999 NE 191 st PH #2
Aventura, FL 33180
3. Date of filing/registration in Florida 4-06-2006
4. Document number L06000036097

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

Dade County Corporate Agents, Inc
Name
18901 NE 29th Avenue Suite 100
Address
Aventura, FL 33180
City, State and Zip

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

Dade County Corporate Agents, Inc
Name
18901 NE 29th Avenue Suite 100
Florida street address (P.O. Box NOT acceptable)
Aventura, FL 33180
City, State and Zip

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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)

Yizhak Toledano
(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.

(Signature of Registered Agent)

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

FILING FEE: \$25.00