

LD6000089638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LTD Marketing & Advertisement Associates, 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:

Ted Sabarese  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

4330 NE 22nd Ave  
(Address)

Fort Lauderdale FL 33308  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ted Sabarese at ( 954 ) 776 4229  
(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 1, 2007

TED SABAVESE  
4330 NE 22ND AVENUE  
FORT LAUDERDALE, FL 33308

SUBJECT: LTD MARKETING & ADVERTISEMENT ASSOCIATES, LLC  
Ref. Number: L06000089638

We have received your document for LTD MARKETING & ADVERTISEMENT ASSOCIATES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6967.

Leslie Sellers  
Document Specialist

Letter Number: 607A00037842

**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: LTD Marketing & Advertising Associates LLC
2. The mailing address of the limited liability company is: 4330 NE 22nd Ave  
Fort Lauderdale FL 33308

Sept 13 2006  
3. Date of filing/registration in Florida

L06000089638  
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:

The Company Corporation Corporation Service Co  
Name  
Box 13397 1201 Hayes St  
Address  
Philadelphia PA 19101 Tallahassee FL 32301  
City, State and Zip

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

Ted Sabarese  
Name  
4330 NE 22nd Ave  
Florida street address (P.O. Box NOT acceptable)  
Fort Lauderdale FL 33308  
City, State and Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

John Theodore Sabarese  
(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]  
(Signature of Registered Agent)

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