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## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

Perrick Family Management Company, LLC SUBJECT: 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:

Joseph A. Porrello Name of Person

Joseph A. Porrello, P.A. Firm/Company

P.O. Box 450249 Address

Miami, FL 33245 City/State and Zip Code

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

For further information concerning this matter, please call:

Joseph A. Porrello 374-0092 305 ) at ( Name of Person Area Code & Daytime Telephone Number **STREET/COURIER ADDRESS:** MAILING ADDRESS: **Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building** P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 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.

,

	Family Management Company_LLC	
(a) Principal office address of limited liability compared	any:	
(Note: MUST BE STREET ADDRESS)	819 Durham Road AFT No. 23 The store of the	
(b) Mailing address of limited liability company		
(Note: MAY BE POST OFFICE BOX)	819 Durham Road	
December 8, 2006	L06000117276	
Date of filing/registration in Florida	4. Document number	
(a) Registered Agent and Registered Office shown of	on the records of the Florida Dent, of State:	
(a) Registered Agent and Registered Office shown a Registered Agent:	Joseph A. Porrello	
Registered Office Address:	2929 Southwest 3rd Avenue Suite 320	
	Miami, FL 33129	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	The second se	
NEW Registered Agent:	June Hermen	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2003 Rosewood Way	
MOST DE FROMDA STREET ADDRESS	Palm Beach Gardens ,FL33418	
d the business office of the registered agent will be id bility company, it is hereby confirmed that the change	e Florida street address of the registered office entical: Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote herwise provided in the articles of organization any.	
anature of a member or authorized representative of a member Steven Perrick inted or typed name of signee		
Stoven Perrick snature of a member or authorized representative of a member Stoven Perrick inted or typed name of signee hereby accept the appointment as registered agent and imply with the provisions of all statutes relative to the ind I an familiar with and accept the obligations of my hapter 608, F.S. Or, if this document is being filed to laress. I hereby confirm that the limited liability comp where other the author of the limited liability comp		
Stoven Perrick Stoven Perrick inted or typed name of signee hereby accept the appointment as registered agent and imply with the provisions of all statutes relative to the ind I an familiar with and accept the obligations of my hapter 608, F.S. Or, if this document is being filed to laress, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper, and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change. 6327, Tallahassee, FL 32314	