

L07000084422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wrong form

Office Use Only



800291363578

10/21/16--01008--011 **35.00

FILED

2016 NOV -2 P 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

NOV 03 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 24, 2016

ROBERT SINOFKY
222 YAMATO ROAD, SUITE 106-220
BOCA RATON, FL 33431

SUBJECT: ALL COAST PROPERTY GROUP, LLC
Ref. Number: L07000084422

We have received your document for ALL COAST PROPERTY GROUP, 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 - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. 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) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 416A00022796

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: All Coast Property 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:

Robert Sinofsky
Name of Person

All Coast Property Group, LLC
Firm/Company

222 Yama to Road, Suite 106-220
Address

Boca Raton, FL 33431
City/State and Zip Code

Rob@allcoastpropertygroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Sinofsky at (561) 706-7053
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 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 the State of Florida.

1. Name of the limited liability company: All Coast Property Group, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

222 Yamato Road, Suite 106-220
Boca Raton, FL 33431

222 Yamato Road, Suite 106-220
Boca Raton, FL 33431

8/16/2007

L07000084422

3. _____ Date of filing/registration in Florida

4. _____ Document number

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

Robert Sinofsky
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
3042 N. Federal Highway, Suite 305
Fort Lauderdale, FL 33306

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Robert Sinofsky
NEW Registered Office Address:
222 Yamato Road, Suite 106-220
Boca Raton, FL 33431

2008 NOV - 2 P 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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 of the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Robert Sinofsky
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 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 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