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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

OCT 15 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southern Cross Financial Services LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Karen Clark

(Contact Person)

Southern Cross Financial Services LLC

(Firm/Company)

1311 SW 1st Avenue

(Address)

Ft Lauderdale , FL 33315

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Karen Clark

(Name of Contact Person)

at (954) 294 7355

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

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

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. Name of the limited liability company: Southern Cross Financial Services LLC

2. (a) Principal office address of limited liability company: 1311 SW 1st Avenue

☐ (Note: **MUST BE STREET ADDRESS**) Ft Lauderdale, FL, 33315

(b) Mailing address of limited liability company: _____

☐ (Note: **MAY BE POST OFFICE BOX**) 1311 SW 1 st Avenue
Ft Lauderdale, FL, 33315

10/08/2007 L07000102274
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:

Registered Agent: Raymundo O Groot
Registered Office Address: 2145 NE 67th St
Ft Lauderdale, FL, 33315

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

NEW Registered Agent: Karen Clark
NEW Registered Office Address: 1311 SW 1 st Avenue
(MUST BE FLORIDA STREET ADDRESS) Ft Lauderdale, FL 33315

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.

Karen Clark
Signature of a member or authorized representative of a member

Karen Clark
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.

Karen Clark
Signature of Registered Agent

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