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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE
JUN 20 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____ Mendell Family, 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:

_____ Benjamin R. Hanan _____
Name of Person

_____ Shumaker, Loop & Kendrick, LLP _____
Firm/Company

_____ 240 South Pineapple Avenue _____
Address

_____ Sarasota, Florida 34230-6498 _____
City/State and Zip Code

_____ bhanan@slk-law.com _____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ Benjamin R. Hanan _____ at (941) _____ 364-2788 _____
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

INHS18 (5/08)

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: __Mendell Family, LLC__

2. (a) Principal office address of limited liability company: __911 Park Avenue, #12-B__

    (*Note: MUST BE STREET ADDRESS*) __New York, NY 10075__

   (b) Mailing address of limited liability company: __911 Park Avenue, #12-B__

    (*Note: MAY BE POST OFFICE BOX*) __New York, NY 10075__

__January 9, 2008__	__L08000002929__
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: __Jenifer Schembri__

    Registered Office Address: __240 S. Pineapple Avenue, 10th Floor__
    __Sarasota, FL 34236__

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

    NEW Registered Agent: __Benjamin R. Hanan__

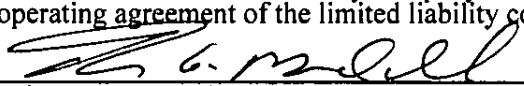   **NEW** Registered Office Address: __Shumaker, Loop & Kendrick, LLP__
    (MUST BE FLORIDA STREET ADDRESS) __240 South Pineapple Avenue__
    __Sarasota__ __,FL 34236__

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

__Thomas G. Mendell__
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

INHS18 (05/08)