

LO8000005703

(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:

Office Use Only



700160449797

09/14/09--01037--006 **25.00

FILED
09 SEP 14 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

SEP 15 2009

EXAMINER

DAVID J. SCHOTTENFELD, P.A.

Attorney at Law

7520 Northwest 5th Street
Suite 203
Plantation, Florida 33317

Telephone (954) 316-5033
Fax (954) 316-5037

September 11, 2009

Florida Department of State
Division of Corporations
Registrations Section
P.O. Box 6327
Tallahassee, FL 32314

Re: Inspirations for Youth and Families, LLC

Gentlemen:

Please find enclosed herein Change of Registered Agent/Registered Office form, together with check in the amount of \$25.00 representing the Filing Fee for such change, with respect to the above referenced matter.

A copy of this document has also been enclosed herein. Kindly acknowledge your receipt of same and forward the acknowledged copy to the undersigned in the envelope provided for your convenience.

Thank you in advance for your courtesy and prompt cooperation in this matter.

Very truly yours,



DAVID J. SCHOTTENFELD

DJS/mib
Encl.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Inspirations for Youth and Families, 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:

David J. Schottenfeld

Name of Person

Inspirations for Youth and Families, LLC

Firm/Company

7520 NW 5 Street # 203

Address

Plantation, FL 33317

City/State and Zip Code

david@dlsPalaw.com

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

For further information concerning this matter, please call:

Christopher Walsh, Managing Member at (561) 350-0313

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 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: Inspirations for Youth and Families, LLC

2. (a) Principal office address of limited liability company: 24 SW 10 Street

☒

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

Ft Lauderdale, FL 33315

(b) Mailing address of limited liability company:

☒

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

757 SE 17 Street

328
Ft Lauderdale, FL 33315

1/16/2008

3. Date of filing/registration in Florida

L08000005703

4. Document number

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

Registered Agent:

Lisa Bradenton

Registered Office Address:

4623 Forest Hill Blvd
Suite 111
West Palm Beach, FL 33415

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

NEW Registered Agent:

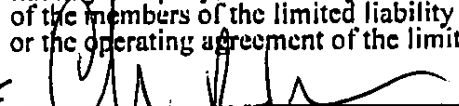
David J. Schottenfeld

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

7520 NW 5 Street
203
Plantation, FL 33317

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

Christopher Walsh

Printed or typed name of signer

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