

L08000044225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

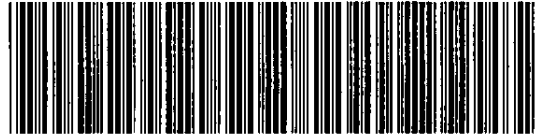
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900145723429

03/16/09--01025--022 \*\*25.00

FILED

09 MAR 16 PM 3:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

MAR 17 2009

EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Hallandale School 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:

Peter Deutsch  
(Name of Person)

Hallandale School LLC  
(Firm/Company)

PO Box 81769  
(Address)

Hollywood, Florida 33081  
(City/State and Zip Code)

FILED  
09 MAR 16 PM 3:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Peter Deutsch at ( 954 ) 232-9579  
(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: Hallandale School LLC

2. (a) Principal office address of limited liability company: Hallandale School LLC  
(Note: **MUST BE STREET ADDRESS**) c/o Academica; Sunset Drive  
Miami, Florida 33143

(b) Mailing address of limited liability company: Peter Deutsch; Hallandale School LLC  
(Note: **MAY BE POST OFFICE BOX**) PO Box 81769  
Hollywood, Florida 33081

5/2/2008

L08000044225

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: Peter Deutsch

Registered Office Address: 1500 San Remo Ave., Suite 125  
Coral Gables, Florida 33146

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

**NEW Registered Agent:** Peter Deutsch

**NEW Registered Office Address:**  
(**MUST BE FLORIDA STREET ADDRESS**) c/o Academica  
6361 Sunset Drive  
Miami, FL 33143

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.

Peter Deutsch  
(Signature of a member or authorized representative of a member)

Peter Deutsch  
(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.*

Peter Deutsch  
(Signature of Registered Agent)

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