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COVER LETTER

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TO: Registration Section **Division of Corporations Equity Solutions 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: Larry Goldstein Name of Person Equity Solutions Group, LLC Firm/Company 13686 Cord Way Delray Beach, FL 33484 City/State and Zip Code largo781@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Larry Goldstein Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

Enclosed is a check for the following amount:

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: Equity Solutions Grou	ıp, İ.L.Ċ		
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	13686 Cord Way Delray Beach, FL 33484		
5/9/2008	108000418	29	
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the	the records of the Florida I	Dept. of State	e:
Registered Agent:	Larry Goldstein	•	
Registered Office Address:	7530 NW 79th Ave,	`≧% ಪ	ı
Registered Office Fiduless.	Unit S-5	S	
	Tamarac, FL 33321	- T	
(b) Enter name of NEW Registered Agent and/or NEW Registered Agent:	W Registered Office addi	ress a la	E E
NEW Registered Office Address:	13686 Cord Way	2. 2.	- inu
(MUST BE FLORIDA STREET ADDRESS)	Delevi Deceb	.FL 33484	
	Delray Beach	,F L_3340	<u> </u>
If the limited liability company is not organized under the longitude that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company. Signature of a member or authorized representative of a member	lorida street address of the ical. Or, in the case of a F	registered o lorida limite	ffice ed
Larry Goldstein Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	– gree to act in this capacity oper and complete perforn sition as registered agent rely reflect a change in th y has been notified in writ	v. I further a nance of my as provided e registered ing of this ch	igree to duties, for in office lange.
Signature of Registered Agent			

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