

LD8000058641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** East Coast Intimates, 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:

Marc Kriskel

(Name of Person)

East Coast Intimates, LLC

(Firm/Company)

7512 Dr Phillips Blvd suite 50-869

(Address)

Orlando FL 32819

(City/State and Zip Code)

For further information concerning this matter, please call:

Marc Kriskel

(Name of Person)

at ( 646 ) 207-3729

(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

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TALLAHASSEE FLORIDA

**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: East Coast Intimates, LLC
2. (a) Principal office address of limited liability company: 7512 Dr Phillips Blvd Suite 50869  
Orlando FL 32819  
(Note: **MUST BE STREET ADDRESS**)
- (b) Mailing address of limited liability company: 7512 Dr. Phillips Blvd Suite 50-869  
Orlando FL 32819  
(Note: **MAY BE POST OFFICE BOX**)
- 6/13/2008
3. Date of filing/registration in Florida
- L 08000058641
4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: Marc Kristel
- Registered Office Address: 11617 Camden Park Dr  
Windsor Park FL 32786
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
- NEW** Registered Agent: Marc Kristel
- NEW** Registered Office Address: 7512 Dr Phillips Blvd Suite 50-869  
Orlando FL 32819  
(**MUST BE FLORIDA STREET ADDRESS**)

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.

Marc Kristel  
(Signature of a member or authorized representative of a member)

Marc Kristel  
(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.

Marc Kristel  
(Signature of Registered Agent)

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

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08 JUL 14 AM 10:05  
SECRETARY OF STATE  
TALLAHASSEE, FL