## LD800017144

(Requestor's Name) (Address)
(Address)
(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:

L. SELLERS

AUG 21 2009

**EXAMINER** 

Office Use Only



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## **COVER LETTER**

. Division of Corporations		
SURJECT: TASHRET REALTY 11.0		
SUBJECT: TASHRET REALTY, LL C.  Name of Limited Liability Company		
Dear Sir or Madam:		
The analog d Designation of Asset/Designation of Office	The second Cod ( ) and I do I do I do I do	
The enclosed Registered Agent/Registered Office C	nange and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
0.0.024.6 0.0 0.0		
PINCHAS DA VIDMAN  Name of Person		
	•	
TASHRET REALTY, LLC		
TASHRET REALTY, LLC		
1095 WOLVERTON "E"	1	
Address		
ROCA PATTILL EL 20		
BOCA RATON, FC 33434  City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
	5 7/5 22/0	
PINCHAS DA VIDMAN at (	Area Code & Davisine Tolombore Number	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

TO: Registration Section



July 31, 2009

PINCHAS DAVIDMAN 1095 WOLVERTON "E" BOCA RATON, FL 33434

SUBJECT: TASHRET REALTY, LLC

Ref. Number: L08000077144

We have received your document for TASHRET REALTY, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 509A00026348

Leslie Sellers Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITEE 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:	RET REALTY LLC
.  2. (a) Principal office address of limited liability company	: 1095 WOLVERTON "E"
(Note: MUST BE STREET ADDRESS)	BOCA RATON, FL 3343
(b) Mailing address of limited liability company:	TASHRET REALTY
(Note: MAY BE POST OFFICE BOX)	CODAVIDMAN 1095 WOLVERON "E"
Aug, 12, 2008  3. Date of filing/registration in Florida	LO80000 77144 FL 33434
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	NATIONAL NEOFFERED AGENS, INC
Registered Office Address:	2731 EYECUTIVE PARKPY SUITE 4 WESTON FL 33331
(b) Enter name of NEW Registered Agent and/or NEW NEW Registered Agent:  NEW Registered Agent:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)	FASHELT REMAIL HE
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identified liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member.  Printed or typed name of signee.  I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of the provisions of the provisions of all statutes relative to the product of the provisions	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmation vote wise provided in the articles of organization.
Vignature of Degistered Agent	

## 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:	RET REALTY, LCC
2. (a) Principal office address of limited liability company	y: 1095 WOLVERTON "E"
(Note: MUST BE STREET ADDRESS)	BOCA RATON, FL 334
(b) Mailing address of limited liability company:	TASHRET REALTY
(Note: MAY BE POST OFFICE BOX)	CODAVIDMAN
Aug. 12,2008	1095 WOLVERON "E" BOEA RATON, FL 33434 LO80000 77144
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:	NATIONAL REGISTERED ACCUTS, INC
Registered Office Address:	2731 EYCEUTIVE PARKEDA, SUITE 4 WESTON FL 33331
NEW Registered Agent:	TASHRET REALTY, UC
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	BOCA PATON, FL 33434
If the limited liability company is not organized under the confirmed 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) of the members of the limited liability company or as other or the operating agreement of the limited liability company	laws of the State of Florida, it is hereby lorida street address of the registered office cical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
PINCHAS H DAVIDMAN	
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 property 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. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y 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