

L08000080520



Mitchell A. Blum
174 Esperanza Way
Palm Beach Gardens, FL 33418

(City/State/Zip/Phone #)

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EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2009

MITCHELL A. BLUM
174 EXPERANZA WAY
PALM BEACH GARDENS, FL 33418

SUBJECT: DIVORCE MEDIATION SETTLEMENT LLC
Ref. Number: L08000080520

We have received your document for DIVORCE MEDIATION SETTLEMENT LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 909A00003319

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: DIVORCE MEDIATOR SETTLEMENT LLC

2. (a) Principal office address of limited liability company: LISA BLUM
(Note: **MUST BE STREET ADDRESS**) 174 ESPERANZA WAY
P.B.G., FL 33418

(b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**) SAME AS ABOVE

8-21-08
3. Date of filing/registration in Florida

608000080520
4. Document number

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

Registered Agent:

Mitchell BLUM

Registered Office Address:

174 ESPERANZA WAY
P.B.G., FL 33418

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

NEW Registered Agent:

Jodie FRANK

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

174 ESPERANZA WAY
P.B.G., FLORIDA
FL 33418

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]
(Signature of a member or authorized representative of a member)

LISA BLUM
(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.

[Signature]
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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