## L0800000093319

(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: A. LUNT		
AUG - <b>3</b> 2010		
EXAMINER		

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT:	291 Group, LLC
Name of	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
~	·· -
JEFFREY TOMCZAK	· ·
Name of Person	ALLAHA
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Firm/Company	
	ت المنافقة ا
2210 NE 57TH ST	PM 3: 4.7
Address	
	<b>TP</b>
FT. LAUDERDALE, FL 333	ns.
City/State and Zip Code	
BR5544@MINDSPRING.CO E-mail address: (to be used for future annual report	OM .
E-mail address: (to be used for future annual report	notification)
For further information concerning this mat	ter, please call:
The state of the s	and the second s
BARBARA TOMCZAK	at ( <u>954</u> ) <u>560-9609</u>
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
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	•
Enclosed is a check for the followi	ng 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.

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1. Name of the limited liability company:	291 GROUP, LLC
2. (a) Principal office address of limited liability company	2210 NE 57TH ST
(Note: MUST BE STREET ADDRESS)	FORT LAUDERDALE, FL 33308
(b) Mailing address of limited liability company:	P.O. BOX 23830
(Note: MAY BE POST OFFICE BOX)	FT. LAUDERDALE FL 33307
3. Date of filing/registration in Florida	- L08000093319
	IN E T
Registered Agent:	TOMCZAK, BARBARA MRS.
Registered Office Address:	3081 N.E. 43 STREET Δ ω L FT. LAUDERDALE FL 33308 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	W Registered Office address:  KENNETH B. WHITMAN  881 E. OAKLAND PARK BLVD  FORT LAUDERDALE ,FL33306
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  Signature of a member or authorized representative of a member  JEFFREY TOMCZAK  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 pro-	laws of the State of Florida, it is hereby lorida street address of the registered office ical. Or, in the case of a Florida limited ) was/were authorized by an affirmative vote wise provided in the articles of organization
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability companions of Registered Agent	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.

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