

•					
(Requestor's Name)					
(Address)					
(100,000)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
,					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Octanical copies					
Special Instructions to Filing Officer:					

Office Use Only



700187270197

11/08/10--01016--027 \*0.5.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

O NOT IS DAY IT.



J. BRYAN

NOV 1 9 2010

**EXAMINER** 



## **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT:	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registe	red Agent/Registered	Office (	Change a	nd fee(s) are	submitted for filing.
Please return all corre	espondence concerning	g this m	atter to tl	ne following:	
	Fred Buchsbaum Name of Person				
Dolphin Prop	perties of South Flori Firm/Company	da, LL(	<u> </u>		56.
15715 Sout	h Dixie Highway, Su <sup>Address</sup>	ite 419			IO NOV 18 PH 1:45 ECRETARY OF STATE LLAHASSEE, FLORID
Paln	netto Bay, FL 33157				STATE STATE FLORIC
	ty/State and Zip Code			1	20 <b>5</b>
	chsbaum@aol.com used for future annual report on concerning this mat				
Fred Bu	uchsbaum	at (	305	)	255-1750
	URIER ADDRESS: ection rporations eg e Center Circle		Area Code & Daytime Telephone Number  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:					
<b>✓</b> \$25 Filing	Fee		\$55	Filing Fee &	Certified Copy





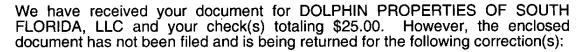
## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2010

FRED BUCHSBAUM DOLPHIN PROPERTIES OF SOUTH FLORIDA, LLC 15715 SOUTH DIXIE HIGHWAY, SUITE 419 PALMETTO BAY, FL 33157

SUBJECT: DOLPHIN PROPERTIES OF SOUTH FLORIDA, LLC

Ref. Number: L08000100979



Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 010A00026319

ordination of the control of the second of the second of the control of the second of the second of the second Second of the sec

## TATEMENT 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:Dolphin	Properties of South Florida, LLC		
2. (a) Principal office address of limited liability company	7: 15715 South Dixie Highway		
(Note: MUST BE STREET ADDRESS)	Suite 419 Palmetto Bay, FL 33157		
(b) Mailing address of limited liability company:	Same		
(Note: MAY BE POST OFFICE BOX)	70 3		
10/27/2008	L08000100930		
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:	Fred Buchsbaum		
Registered Office Address:	15715 South Dixie Highway Suite 419 Palmetto Bay, FL 33157		
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NEW</b>	W Registered Office address:		
<b>NEW</b> Registered Agent:	Fred Buchsbaum		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	15715 South Dixie Highway Suite 419 Palmetto Bay ,FL33157		
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	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote		
Fred Buchsbaum Printed or typed name of signee	<del></del>		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the providing and I am familiar with and accept the obligations of my pochapter 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