

LD8000117916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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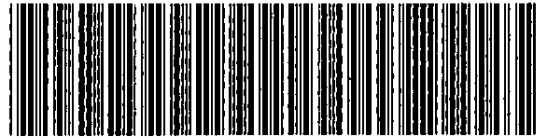
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 MAY 10 PM 6:56

FILED

C. LEWIS

MAY 11 2010

EXAMINER

COVER LETTER

TQ: Registration Section
Division of Corporations

SUBJECT: ELA GROUP 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:

Name of Person

ELA GROUP LLC

Firm/Company

9648 Phipps Lane

Address

Wellington, FL 33414-3404

City/State and Zip Code

gbordoley@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gilead Bordoley

Name of Person

at (954)

4946895

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

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: ELA GROUP LLC

2. (a) Principal office address of limited liability company: _____



(Note: MUST BE STREET ADDRESS)

9648 Phipps Lane, Wellington FL 33414

(b) Mailing address of limited liability company: _____



(Note: MAY BE POST OFFICE BOX)

9648 Phipps Lane, Wellington FL 33414

12/31/2008

3. Date of filing/registration in Florida

4. Document number

L08000117916

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

Registered Agent:

Gilead Bordoley

Registered Office Address:

11550 NW 56 Drive Suite 112
Coral Springs FL 33076

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

NEW Registered Agent:

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

9648 Phipps Lane

Wellington

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 of a member or authorized representative of a member

Pascal Matunda

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 of Registered Agent

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

FILING FEE: \$25.00