

LD900001051063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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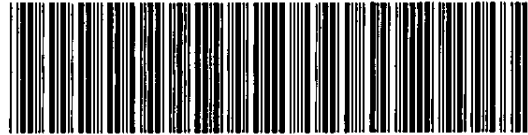
(Business Entity Name)

(Document Number)

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11 JUL 20 AM 03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
JUL 21 2011  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TURF LOGIX 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:

SHELDON E ISRAELSON

Name of Person

TURF LOGIX LLC

Firm/Company

11331 BRIARWOOD PLACE 6F

Address

NORTH PALM BEACH FL 33408

City/State and Zip Code

TURFLOGIX@COMCAST.NET

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

FILED  
11 JUL 20 AM 10 03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

SHELDON ISRAELSON

Name of Person

at ( 561 )

707-0501

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: TURF LOGIX LLC

2. (a) Principal office address of limited liability company: 11331 BRIARWOOD PLACE 6F

**(Note: MUST BE STREET ADDRESS)**

NORTH PALM BEACH, FL 33408

(b) Mailing address of limited liability company: 11331 BRIARWOOD PLACE 6F

**(Note: MAY BE POST OFFICE BOX)**

NORTH PALM BEACH, FL 33408

07/08/2009

L09000065663

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:

UNITED STATES CORPORATION AG

Registered Office Address:

13302 WINDING OAKS BLVD  
A-100  
TAMPA, FL 33612

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

**NEW Registered Agent:**

SHELDON E ISRAELSON

**NEW Registered Office Address:**

11331 BRIARWOOD PLACE 6F

**(MUST BE FLORIDA STREET ADDRESS)**

NORTH PALM BEACH, FL 33408

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.



7-18-2011

Signature of a member or authorized representative of a member

SHELDON E ISRAELSON, MGRM

Printed or typed name of signer

*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.*



7-18-2011

Signature of Registered Agent

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

**FILING FEE: \$25.00**