

LO9000117396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

T. CLINE

JUL 26 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 2, 2010

ALFRED RIEGER  
160 W. CAMINO REAL, #122  
BOCA RATON, FL 33432

SUBJECT: SOUTHFLORIDIAN ENTERPRISES, LLC  
Ref. Number: L09000117396

We have received your document for SOUTHFLORIDIAN ENTERPRISES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the new registered agent information in section 5b.

Section 608.407, Florida Statutes, requires the document(s) to be signed by 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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 210A00016208

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** South Floridian Enterprises, 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:

Alfred Rieger

Name of Person

South Floridian Enterprises, LLC

Firm/Company

160 W. Camino Real, #122

Address

Boca Raton, FL 33432

City/State and Zip Code

arieger71@gmail.com

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

For further information concerning this matter, please call:

Alfred Rieger

Name of Person

at ( 561 )

251-7050

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

*Encl. check # 539*

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TALLAHASSEE, FLORIDA

**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: South Floridian Enterprises, LLC

2. (a) Principal office address of limited liability company: 160 W. Camino Real, #122

☒

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

Boca Raton, FL 33432

(b) Mailing address of limited liability company: 160 W. Camino Real, #122

☒

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

Boca Raton, FL 33432

12/10/2009 4. Document number L09000117396

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: Alfred Rieger

Registered Office Address: 601 N. Ocean Blvd.  
Apt. 304  
Boca Raton, FL 33432

(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)** \_\_\_\_\_

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

Alfred Rieger

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