

L10000013705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

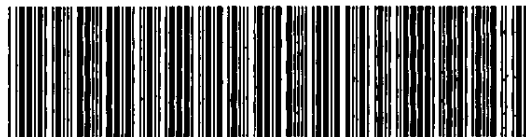
(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2010 APR 21 PM 1:27

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2010

T. ROBERT ZOCHOWSKI
1001 N. US HIGHWAY ONE SUITE 400
JUPITER, FL 33477

SUBJECT: WILENSKY FAMILY, LLC
Ref. Number: L10000013705

We have received your document for WILENSKY FAMILY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 010A00007280

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wilensky Family, 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:

Mr. Marvin Wilensky

Name of Person

Firm/Company

12 Windward Isle

Address

Palm Beach Gardens, FL 33418

City/State and Zip Code

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

For further information concerning this matter, please call:

Marvin Wilensky

Name of Person

at (561) 379-6216

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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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: Wilensky Family, LLC

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

☒ (Note: MUST BE STREET ADDRESS)

12 Windward Isle
Palm Beach Gardens, FL 33418

(b) Mailing address of limited liability company: _____

☒ (Note: MAY BE POST OFFICE BOX)

12 Windward Isle
Palm Beach Gardens, FL 33418

February 4, 2010

3. Date of filing/registration in Florida

L10000013705

4. Document number

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

Registered Agent:

T. Robert Zochowski

Registered Office Address:

Suite 400
1001 N. U.S. Highway One
Jupiter, FL 33477

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

NEW Registered Agent:

Marvin Wilensky

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

12 Windward Isle
Palm Beach Gardens
FL 33418

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.

Marvin Wilensky, Trustee
Signature of a member or authorized representative of a member

Marvin Wilensky, Trustee

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.

Marvin Wilensky
Signature of Registered Agent

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

FILING FEE: \$25.00