

From: Jeff Lieser

Division of Corporations

Fax: (813) 251-8715

To:

Fax: +1 (850) 617-6383

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LIESER SKAFF ALEXANDER, PLLC

Account Number : I20150000057

Phone : (813) 280-1256

Fax Number : (813) 251-8715

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: jeff@lieserskaff.com

**LLC REGISTERED AGENT CHANGE  
LIESER & SKAFF, P.L.**

Certificate of Status	0
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Page Count	03
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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lieser & Skaff, P.L.

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:

Jeffrey P. Lieser

Name of Person

Lieser & Skaff, P.L.

Firm/Company

403 N. Howard Avenue

Address

Tampa, FL 33606

City/State and Zip Code

info@lieserskaff.com

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

For further information concerning this matter, please call:

Jeffrey P. Lieser

at ( 813 )

280-1256

Name of Person

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

INHS18 (2/14)

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# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: Lieser & Skaff, P.L.

2. (a) 403 N. Howard Avenue (b) 403 N. Howard Avenue

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Tampa, FL 33606

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Tampa, FL 33606

03/15/2010

L10000028625

3. Date of filing/registration in Florida

4. Document number

5. (a) Jeffrey P. Lieser

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

511 West Bay Street

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Suite 350

Tampa, FL 33606

(b) Jeffrey P. Lieser

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

403 N. Howard Avenue

NEW Registered Office Address:

Tampa, FL 33606

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.

Jeffrey P. Lieser  
Signature of a member or authorized representative of a member

Jeffrey Lieser  
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 605, 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.

Jeffrey P. Lieser  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00

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