

L10 0000 41405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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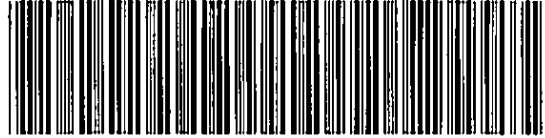
(Business Entity Name)

(Document Number)

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**Y SULKER
DEC 17 2019**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 2, 2019

BENJAMIN SOLUTIONS GROUP, LLC
PO BOX 262
ST. PETERSBURG, FL 33731

SUBJECT: BENJAMIN SOLUTIONS GROUP, LLC
Ref. Number: L10000041405

We have received your document for BENJAMIN SOLUTIONS GROUP, 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):

A post office box is not an acceptable address for the registered agent.

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) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 719A00024307

RECEIVED

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Benjamin Solutions 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:

Starlett M. Massey
Name of Person

Massey Law Group, P.A.
Firm/Company

P.O. Box 262
Address

St. Petersburg, FL 33731
City/State and Zip Code

smassey@masseylawgroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Starlett M. Massey at (813) 868-5601
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 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: Benjamin Solutions Group, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

5701 E. Hillsborough Avenue
Suite 1160, Tampa, FL 33610

P.O. Box 2597
Riverview, FL 33568

3. 04/19/2010 4. L10000041405
Date of filing/registration in Florida Document number

5. (a) Anthony J. Benjamin, Sr.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

13701 Eve Margaret Ct.
Riverview FL 33579

(b) Massey Law Group, P.A.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

76 4th Street, #202
St. Petersburg FL 33731

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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]
Signature of a member or authorized representative of a member

Starlett M. Massey
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 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.

[Signature]
Signature of Registered Agent