

L11000003438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2011 FEB 24 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER  
FEB 25 2011

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FLORIDA SMB  
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:

BERTHOMIEU Serge

Name of Person

Florida SMB

Firm/Company

6702 Pointe West Blvd

Address

Bradenton, FL 34209

City/State and Zip Code

mcmn@verizon.net

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

For further information concerning this matter, please call:

Michel Cerene

Name of Person

at ( 941 )

5459591

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

**FILED**  
2011 FEB 24 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

INHS18 (05/08)