

L11000019477

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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L11-19477

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16 MAY 23 PM 4:12  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

MAY 24 2016

N. CAUSSEAU

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BLACK PEARL FINANCIAL SERVICES 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:

RUBEN V. ROZENTAL  
Name of Person

BLACK PEARL FINANCIAL SERVICES LLC  
Firm/Company

350 SEVILLA AVE. SUITE 101B  
Address

CORAL GABLES FL 33155  
City/State and Zip Code

RUBEN@BLACKPEARLS.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RUBEN V. ROZENTAL at ( 305 ) 790-0465  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 11, 2016

RUBEN V. ROZENTAL  
BLACK PEARL FINANCIAL SERVICES LLC  
5838 DEVONSHIRE BLVD., APT. C  
MIAMI, FL 33155

SUBJECT: BLACK PEARL FINANCIAL SERVICES LLC  
Ref. Number: L11000019477

We have received your document for BLACK PEARL FINANCIAL SERVICES 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.

You completed the form for a corporation, not LLC. You do NOT need to send additional money.

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) 245-6051.

Nanette Causseaux  
Regulatory Specialist II Supervisor

Letter Number: 016A00009993

**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: BLACK PEARL FINANCIAL SERVICES LLC

2. (a) 5838 DEVONSHIRE BLVD. (b) 5838 DEVONSHIRE BLVD.  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

APT. C APT. C  
MIAMI, FL 33155 MIAMI, FL 33155

3. 2/7/2011 4. L11000019477  
Date of filing/registration in Florida Document number

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

5838 DEVONSHIRE BLVD.  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
APT. C  
MIAMI, FL 33155

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

350 SEVILLA AVENUE  
**NEW Registered Office Address:**  
SUITE 101B  
CORAL GABLES, FL 33134

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TALLAHASSEE, FLORIDA  
DIVISION OF STATE

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

RUBEN V. ROZENTAL  
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.

[Signature]  
Signature of Registered Agent