

L11000048634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

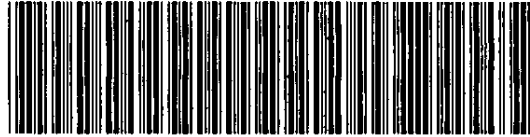
(Business Entity Name)

(Document Number)

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2016 MAY 12 P 12:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 18 2016  
J. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 29, 2016

JEANNE FRIEDLANDER  
14114 HETRICK CIRCLE N  
LARGO, FL 33774

SUBJECT: JEANNE FRIEDLANDER, LLC  
Ref. Number: L11000048634

We have received your document for JEANNE FRIEDLANDER, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 916A00008968

2016 MAY 12 P 12:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JEANNE FRIEDLANDER 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:

JEANNE FRIEDLANDER

Name of Person

JEANNE FRIEDLANDER, LLC

Firm/Company

14114 HETRICK CIRCLE N

Address

LARGO, FL 33774

City/State and Zip Code

JMF868@YAHOO.COM

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

For further information concerning this matter, please call:

JEANNE FRIEDLANDER at ( 727 ) 251-7372

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

2016 APR 28 PM 1:18  
TALLAHASSEE, FLORIDA

2016 MAY 12 PM 12:50  
TALLAHASSEE, FLORIDA

FILED

**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: JEANNE FRIEDLANDER, LLC

2. (a) JEANNE FRIEDLANDER, LLC

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

8686 131ST STREET, SALON 300

SEMINOLE, FL 33776

(b) JEANNE FRIEDLANDER, LLC

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

14114 HETRICK CIRCLE NORTH

LARGO, FL 33774

4/25/2011

L11000048634

3. Date of filing/registration in Florida

4. Document number

5. (a) VAN SCOIK & WOLTIL LLP

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

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

2348 SUNSET POINT ROAD, SUITE A

CLEARWATER, FL 33765

(b) MINA P. WOLTIL

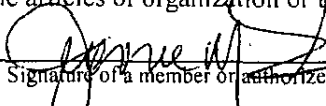
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Office Address:**

10901 DANIELLE DRIVE

LARGO, FL 33774

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 of a member or authorized representative of a member

Jeanne Friedlander  
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 of Registered Agent

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

**FILED**  
2016 MAY 12 P 12:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA