L11000122535

Office Use Only

G. MCLEOD

SEP - 4 2012

EXAMINER



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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ		MANAGEMENT, LLC mited Liability Company
Dear S	Sir or Madam:	
The en	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please	return all correspondence concerning the	nis matter to the following:
	Shmuel Meersohn Name of Person	
	Firm/Company	
	9858 Glades Road #220 Address	
	Boca Raton, FL 33434 City/State and Zip Code	
	R. Kim @gmail.	
E-1	mail address: (to be used for future annual report not	ification)
For fur	rther information concerning this matter	, please call:
Lim		at (954) 931-2043
	Name of Persol	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 (5/08)

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

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.

1. Nan	ne of the limited liability company:M	BY MANAGEMENT, LLC		
2. (a)	Principal office address of limited liability company	: 1930 Tyler Street		
	(Note: MUST BE STREET ADDRESS)	Hollywood, Florida 33020		
(b)	Mailing address of limited liability company:	9858 Glades Road #220		
	(Note: MAY BE POST OFFICE BOX)	Boca Raton, FL 33434		
	10/27/2011	L11000122535		
3. Date	e of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Agent:	Shmuel Meersohn		
	Registered Office Address:	9858 Glades Road #220 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office addressn				
	NEW Registered Agent:	Michael W. Gomez, Esquare		
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1930 Tyler Road Hollywood ,FL33020		
10.1 1				
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				
	hmuel Meersohn			
	r typed name of signee	-		
I herel comply and I a Chapte address	by accept the appointment as registered agent and as with the provisions of all statules relative to the pro m familiar with and discept the obligations of my pos n 608, F.S. Or, if this document is being filed to men s, I have by confirm that the limited trapility company	gree to act in this capacity. I further agree to per and complete performance of my duties, lition as registered agent as provided for in sely reflect a change in the registered office has been notified in writing of this change.		

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

Signature of Registered Agent