

U2000022456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

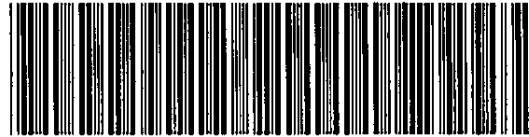
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600246376666

04/09/13--01013--022 **25.00

RECEIVED
CLERK OF STATE
TOLSON

2013 APR -9 PM 1:12

FILED

APR 10 2013

CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 448 OCEAN DR 304, 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:

Datan Dorot

Name of Person

Dorot & Bensimon PL

Firm/Company

2775 Sunny Isles Blvd. Suite 118

Address

North Miami Beach, FL 33160

City/State and Zip Code

info@dorotbensimon.com

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

For further information concerning this matter, please call:

Datan Dorot

Name of Person

at (**305**) **921-9421**

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

2013 APR -9 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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. Name of the limited liability company: 448 OCEAN DR 304, LLC

2. (a) Principal office address of limited liability company: 3440 SW 134 Court
Miami, FL 33175
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
3440 SW 134 Court
Miami, FL 33175

February 15, 2012

3. Date of filing/registration in Florida

4. Document number

L12000022456

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

Registered Agent:

Dorot & Bensimon PL

Registered Office Address:

2775 Sunny Isles Blvd

118

North Miami Beach, FL 33160

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

NEW Registered Agent:

DORBEN CORPORATE SERVICES, LLC

NEW Registered Office Address:

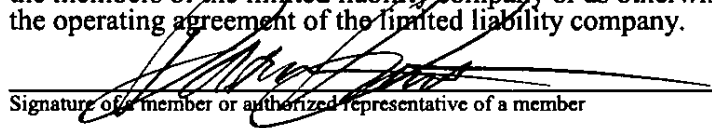
2775 Sunny Isles Blvd

(MUST BE FLORIDA STREET ADDRESS)

118

North Miami Beach, FL 33160

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

Datan Dorot

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 608, 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