

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
 Fax Number : (850)617-6383

From:

Account Name : TRIAD PROFESSIONAL SERVICES  
 Account Number : I20160000008  
 Phone : (850)777-2091  
 Fax Number : (770)220-1943

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC REGISTERED AGENT CHANGE**  
**EAST SHORE VENTURES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

T-GLASS

JUN 28 2019

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Corporate Filing Menu

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850-817-8381

6/26/2019 12:52:07 PM PAGE 1/001 Fax Server



June 26, 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

EAST SHORE VENTURES, LLC  
C/O ZIVI NEDIVI  
P.O. BOX 1767  
NEW YORK, NY 10150

SUBJECT: EAST SHORE VENTURES, LLC  
REF: L12000039673

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass  
Regulatory Specialist II  
Amount charged: 25.00

FAX Aud. #: H19000196969  
Letter Number: 819A00012964

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AND  
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Fast Shore Ventures, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fcc(s) are submitted for filing.

**Please return all correspondence concerning this matter to the following:**

## Zivi Nedivi

Name of Person

East Shore Ventures, LLC

Firm/Company

P.O. Box 1767

**Address**

New York, NY 10150

City/State and Zip Code

znedivi@outloo.com

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

For further information concerning this matter, please call:

Name of Person

Area Code &amp; 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**

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# 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: East Shore Ventures, LLC
2. (a) c/o Zivi Nedivi  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
18-A Ofir Street  
Tel-Aviv 69014 Israel
- (b) c/o Zivi Nedivi  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
P.O. Box 1767  
New York, NY 10150
3. 03/21/2012  
Date of filing/registration in Florida
4. L12000039673  
Document number

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

NRAI SERVICES, INC  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
1200 South Pine Island Road  
Plantation, FL 33324

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

Zivi Nedivi  
NEW Registered Office Address:  
101 South Fort Lauderdale Beach Blvd. Apt 2006  
Fort Lauderdale, FL 33316

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

Zivi Nedivi  
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.*

By: Zivi Nedivi  
Signature of Registered Agent

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

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AND  
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