

L12000099070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

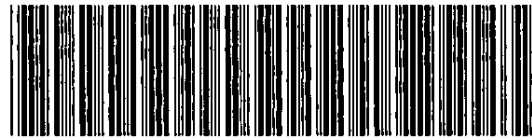
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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T. CLINE

AUG 20 2012

EXAMINER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 AUG 13 AM 8:26

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 7, 2012

NABIL KISHK
PO BOX 6467
LAKE WORTH, FL 33466

SUBJECT: LIVE OAK PARK LLC
Ref. Number: L12000099070

We have received your document for LIVE OAK PARK LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Tammi Cline
Regulatory Specialist II

Letter Number: 512A00020474

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Live Oak Park 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:

Nabil Kishk
Name of Person

Live Oak Park LLC
Firm/Company

PO Box 6467
Address

Lake Worth, FL 33466
City/State and Zip Code

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

For further information concerning this matter, please call:

Nabil Kishk at (954) 554-8525
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

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2012 AUG 13 AM 9:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Live Oak Park LLC

2. (a) Principal office address of limited liability company: 4789 Gulfstream Road

(Note: **MUST BE STREET ADDRESS**) Lake Worth, FL 33461

(b) Mailing address of limited liability company: PO Box 6467

(Note: **MAY BE POST OFFICE BOX**) Lake Worth FL 33466

August 2, 2012 L12000099070
3. Date 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: William R. H. Broome

Registered Office Address: 2465 Mercer Avenue, Suite 207
West Palm Beach, FL 33401

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

NEW Registered Agent: Nabil Kishk

NEW Registered Office Address: 4789 Gulfstream Road
(**MUST BE FLORIDA STREET ADDRESS**) Lake Worth, FL 33461

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.

Nabil Kishk
Signature of a member or authorized representative of a member

Nabil Kishk
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 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.

Nabil Kishk
Signature of Registered Agent

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