

L12000152584

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SEP - 6 2013

J. BRYAN



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 23, 2013

JOE ZALMAN
ANALYTIC PROPERTIES, LLC
131 E MANGROVE BAY WAY
JUPITER, FL 33477

SUBJECT: ANALYTIC PROPERTIES, LLC
Ref. Number: L12000152584

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TALLAHASSEE, FLORIDA

We have received your document for ANALYTIC PROPERTIES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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.

Joey Bryan
Regulatory Specialist II

Letter Number: 313A00020168

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Analytic Properties, 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:

Joe Zalman

Name of Person

Analytic Properties, LLC.

Firm/Company

131 E MANGROVE BAY WAY

Address

JUPITER, FL 33477

City/State and Zip Code

jzalman@bellsouth.net

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

For further information concerning this matter, please call:

Joe Zalman

Name of Person

at (561) 371-6730

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:

Previous ☒ \$25 Filing Fee
check enclosed

☐ \$55 Filing Fee & Certified Copy

INHS18 (5/08)

Incorrectly sent in Corporation Form prior with \$35 payment.
Please see attached check cashed by
Florida Dept of State.
Called to verify that check was received and no duplicate
payment was required.

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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.

Analytic Properties, LLC.

1. Name of the limited liability company: _____

2. (a) Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) _____
131 E MANGROVE BAY WAY
JUPITER, FL 33477

(b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**) _____
131 E MANGROVE BAY WAY
JUPITER, FL 33477

12/06/2012

L12000152584

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:

CORPORATION SERVICE COMPANY

Registered Office Address:

1201 HAYS STREET

TALLAHASSEE, FL 32301

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

NEW Registered Agent:

Joe Zalman

NEW Registered Office Address:

131 E MANGROVE BAY WAY

(**MUST BE FLORIDA STREET ADDRESS**)

JUPITER, FL 33477, FL

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.

J. Zalman
Signature of a member or authorized representative of a member

Joe Zalman
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.

J. Zalman
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA