

L13 000011655

(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



200256432462

02/07/14--01015--015 **25.00

FILED
2014 FEB -7 PM 1:31
SECRETARY OF STATE
TAL. 214.757.6000

FEB 10 2014
T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HAMILTON PARKER GROUP, 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:

Joseph J. Tretola

Name of Person

Hamilton Parker Group, LLC

Firm/Company

1730 S. Federal Hwy #334

Address

Delray Beach, FL 33483

City/State and Zip Code

Joseph@hamiltonparkergroup.com

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

For further information concerning this matter, please call:

Joseph Tretola

Name of Person

at (888) 778-1431

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

2014 FEB -7 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA 32301

FILED

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

Pursuant to the provisions of sections 605.0114, 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: HAMILTON PARKER GROUP, LLC
2. (a) Principal office address of limited liability company: 1730 S. Federal Hwy # 334
Delray Beach, FL 33483
(Note: MUST BE STREET ADDRESS)
- (b) Mailing address of limited liability company: _____
(Note: MAY BE POST OFFICE BOX)
3. Date of filing/registration in Florida: 01/23/2013
4. Document number: L13000011655
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Agent: Joseph J. Tretola
Registered Office Address: 100 E. Linton Blvd Ste 402B
Delray Beach, FL 33483
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NO change
1730 S. Federal Hwy # 334
Delray Beach, FL 33483
(MUST BE FLORIDA STREET ADDRESS)

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

Joseph J. Tretola

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 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.

Signature of Registered Agent

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

FILING FEE: \$25.00