

L13000044780

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE, FLORIDA  
15 MAR 16 PM 2:58

MAR 16 2015  
T. CARTER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NADEL PROPERTY MANAGEMENT  
Name of Limited Liability Company

**DOC #** 43000044780

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:

LAURA NADEL

Name of Person

NADEL PROPERTY MANAGEMENT.

Firm/Company

254 FIDDLERS PT. DRIVE

Address

ST. AUGUSTINE FL 32080

City/State and Zip Code

LAURA MAY NADEL@GMAIL.COM

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

For further information concerning this matter, please call:

LAURA NADEL at (305) 924-8708

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 26, 2015

LAURA NADEL  
NADEL PROPERTY MANAGEMENT  
254 FIDDLERS POINT DRIVE  
ST AUGUSTINE, FL 32080 US

SUBJECT: NADEL PROPERTY MANAGEMENT LLC  
Ref. Number: L13000044780

We have received your document for NADEL PROPERTY MANAGEMENT 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):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

\* 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) 245-6050.

Tina D Carter  
Regulatory Specialist

Letter Number: 815A00004035

RETURNED, WITH COPY LETTER, AS  
REQUESTED 3/5/2015.

RECEIVED  
15 MAR 16 AM 11:34  
DIVISION OF CORPORATIONS

**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: NADEL PROPERTY MANAGEMENT LLC

2. (a) 254 FIDDLERS PT DRIVE (b) SAME

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

ST. AUGUSTINE, FL 32080

03/26/2013

L1 3000044780

3. Date of filing/registration in Florida

4. Document number

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

177 ISLANDER DR, ST. AUGUSTINE, FL 32080  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

\_\_\_\_\_, FL \_\_\_\_\_

(b) LAURA NADEL (PRINCIPAL)

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

254 FIDDLERS PT. DRIVE

**NEW Registered Office Address:**

ST. AUGUSTINE, FL 32080

\_\_\_\_\_, 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.

Laura Nadel  
Signature of a member or authorized representative of a member

LAURA M. NADEL (PRINCIPAL)  
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.*

Laura Nadel  
Signature of Registered Agent

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 MAR 16 PM 2:58