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(City/State/Zip/Phone #)	04/18/1601037005 **25.00		
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April 15, 2016

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

**RE:** Change of Registered Agent

Dear Sir/Madam:

Please find enclosed a completed Statement of Change of Registered Agent form for Gateway Cable, LLC. Also, enclosed is a check in the amount of \$25.00 for the fee.

Please contact my office at the above number if you have any questions. Thank you for your attention to this matter.

Very truly yours,

William H. Pinous WHP/cc

Enclosures cc: Howard Bernstein (via e-mail, with enclosures) Tyler Bell (via e-mail, with enclosures)

## COVER LETTER

:

TO: Registration Section Division of Corporations

SUBJECT: \_\_\_\_\_GATEWAY CABLE, 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:

William H. Pincus, Esq.

Name of Person

Pincus & Currier LLP

Firm/Company

324 N. Lakeside Court

Address

West Palm Beach, FL 33407

City/State and Zip Code

djames@pincusandcurrier.com

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

For further information concerning this matter, please call:

William H. Pincus	561 868-1340
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	1 ,
Enclosed is a check for the following amo	ount:
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy
INHS18 (2/14)	:

## 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.

. Na	me of the limited liability company:	ABLE, LL	С			
2. (a)	3965 Investment Lane	(b) <sup>3</sup>	(b) 3965 Investment Lane			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liabi (Note: MAY BE POST OF I	• • -		
	Suite A-5	S	Suite A-5			
	West Palm Beach, FL 33404		Vest Palm Beach, FL 33404			
	6/25/2013	L1	3000091202			
	Date of filing/registration in Florida	4.	Document number	-		
. (a)	Bernstein, Howard					
. (u)	Registered Agent and Registered Office shown on the records of 3965 Investment Lane	the Florida De	p1. of State:			
	Registered Office Address (MUST BE FLORIDA STREET) A-5	ADDRESS)		16 A		
	West Palm Beach, FL	33404		APR 18		
(b)	Pincus & Currier LLP		55: 55:	PH		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addre	<u>ss</u> :	ណ្ណ ស្ត្រ ទា		
	324 N. Lakeside Court					
	NEW Registered Office Address:					
	West Palm Beach, FL					
he cha gent w /as/we	mited liability company is not organized under the lay nge or changes are made, the Florida street address of rill be identical. Or, in the case of a Florida limited li- re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	The register ability comp of the limite limited liab	ed office and the business office of bany, it is hereby confirmed that the d liability company or as otherwis ility company.	of the registered		
	677	Howa	rd S. Bernstein, Manager			
-	ure of a hember of authorized representative of a member by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change	ree to act in performanc d for in Cha hereby conf	Printed or typed name of sign this capacity. I further agree to c ce of my duties, and I am familiar upter 605, F.S. Or, if this documen irm that the limited liability comp.			

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