## 113000093645

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## **COVER LETTER**

	egistration Section Division of Corporations			
SUBJEC	Hasson Real Estate and Man	agement Ll	.C	
COBULE		of Limited Li	ability Company	
Dear Sir o	or Madam:			
The enclo	osed Registered Agent/Registered Office	Change and	fee(s) are submitted for filing	ng.
Please ret	aurn all correspondence concerning this	matter to the	following:	
Jean Ha	asson			
	Name of Person		_	
Hasson	Real Estate & Management LLC			
	Firm/Company		<del></del>	150 61
5750 Vi	a De La Plata Circle			07 [
	Address		_	=
Delray E	Beach, Florida 33484			•
	City/State and Zip Code		_	
jean@je	eanhasson.com			
E-m	ail address: (to be used for future annua	l report notif	ication)	
For furthe	er information concerning this matter, pl	lease call:		
Jean Ha	asson	561	901 6330	)
	Name of Person	<u></u>	Area Code & Daytime Te	lephone Number
R D C 20	TREET/COURIER ADDRESS: Legistration Section Division of Corporations Clifton Building 661 Executive Center Circle Fallahassee, Florida 32301	Re Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassec, Florida 32314	
E	nclosed is a check for the following a	mount:		
	\$25 Filing Fee	<b>☑</b> \$5	55 Filing Fee & Certified Co	ppy
INHS18 (2	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:	Hasson Rea	l Estate &	Manager	ment LLC	
(a)	5750 Via De La Plata Circle		(b) (	5750 Via	De La Plata Cir	rcle
()	Principal office address of limited li (Note: MUST BE STREET)		(0) =		ailing address of limite	
	Delray Beach, Florida 33484	<u>100KE33</u> )	C		each, Florida 33	
	January 26, 2016		L	3000093	3645	
	Date of filing/registration i	n Florida	4.	I	Document number	
(a)	Jean Hasson					
(4)	Registered Agent and Registered Office sho	wn on the records o	f the Florida D	ept. of State:		
	14394 Via Royale # 4					
	Registered Office Address (MUST BE )	FLORIDA STREET	ADDRESS)			TASE SE
						CART LARIA
	Delray Beach		. 33446			1 28
		, F	L			± 4.7 — 4.
(b)	Jean Hasson					PH CERT
(5)	Enter name of NEW Registered Agent and	/or <u>NEW Registere</u>	d Office addre	: <u>ss</u> :		4: 2
	5750 Via De La Plata Circle					- OA
	NEW Registered Office Address:					
	Delray Reach		22404			
	Delray Beach	, F	L_33484			

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