

# L13000155343

(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



## 600260545226

05/30/14--01007--024 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 MAY 30 A 1:09

FILED

T. LEMIEUX

JUN 11 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Bridgewater Consults, 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:

Jeffrey S. Kaufman, Esq.

\_\_\_\_\_  
Name of Person

Kaufman, Englett & Lynd, PLLC.

\_\_\_\_\_  
Firm/Company

111 N. Magnolia Ave., Ste 1600

\_\_\_\_\_  
Address

Orlando, FL 32801

\_\_\_\_\_  
City/State and Zip Code

sfurnari@kelattorneys.com

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

For further information concerning this matter, please call:

Jeffrey S. Kaufman, Esq.

at ( 407 )

513-1900

\_\_\_\_\_  
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