

L14000072504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

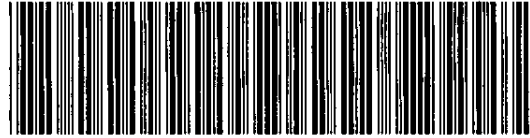
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 AUG - 6 PM 4: 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG - 6 2015
T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: One Direction Aventura, 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:

Nestor Gorfinkel

Name of Person

Registered Services, LLC

Firm/Company

2241 Hollywood Blvd.

Address

Hollywood, FL 33020

City/State and Zip Code

fl.regservices@gmail.com

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

For further information concerning this matter, please call:

Nestor Gorfinkel

Name of Person

at (305)

932-5757

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

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15 AUG -6 PM 3: 12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 22, 2015

REGISTERED SERVICES, LLC ***** 2ND MAILING *****
NESTOR GORFINKEL
2241 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020

SUBJECT: ONE DIRECTION AVENTURA, LLC
Ref. Number: L14000072504

We have received your document for ONE DIRECTION AVENTURA, LLC and your check(s) totaling \$595.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6051.

Tammy Hampton
Regulatory Specialist III

Letter Number: 015A00013868



RECEIVED

15 JUL 21 PM 3:29

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 1, 2015

NESTOR GORFINKEL
REGISTERED SERVICES LLC
2241 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020

SUBJECT: ONE DIRECTION AVENTURA, LLC
Ref. Number: L14000072504

We have received your document for ONE DIRECTION AVENTURA, LLC and your check(s) totaling \$595.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Tammy Hampton
Regulatory Specialist III

Letter Number: 015A00013868

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: One Direction Aventura, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 5/5/14 4. L14 0000 72504
Date of filing/registration in Florida Document number

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

REGISTERED SERVICES, LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

20818 West Dixie Highway

Aventura, FL 33180

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Registered Services, LLC

NEW Registered Office Address:

2241 Hollywood Blvd.

Hollywood, FL 33020

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TALLAHASSEE, FLORIDA

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.

James E. Knott, LLC Manager
Signature of a member or authorized representative of a member

MANAGER LAUREN Knappe de Boy
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.

Nestor G. Gunkel
Signature of Registered Agent

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