

L14000 175F02

(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



600276493466

08/31/15--01028--029 \*\*25.00

FILED  
15 AUG 31 AM 11:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 02 2015  
J SHIVERS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FIN AID TECH, 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:

Andrew Shankman

Name of Person

FIN AID TECH, LLC

Firm/Company

4830 Foxtail Palm Court

Address

Greenacres, FL 33463

City/State and Zip Code

shankman@live.com

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

For further information concerning this matter, please call:

Andrew Shankman

Name of Person

at ( 954 )

257-4061

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

**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: FIN AID TECH, LLC

2. (a) 4830 Foxtail Palm Court (b) \_\_\_\_\_

Principal office address of limited liability company:

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

Greenacres, FL 33463

Mailing address of limited liability company:

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

Greenacres, FL 33463

08/29/2014

L14000135802

3. Date of filing/registration in Florida

4. Document number

5. (a) Andrew Shankman

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3711 37th Way

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

West Palm Beach, FL 33407

(b) Andrew Shankman

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

4830 Foxtail Palm Court

NEW Registered Office Address:

Greenacres, FL 33463

FILED  
15 AUG 31 AM 11:58  
SECRETARY OF STATE  
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.

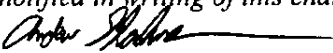


Signature of a member or authorized representative of a member

Andrew Shankman

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.*



Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00