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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 02 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Casentials, 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:

Kimberly A. Ginsburg, Esq.

Name of Person

Firm/Company

400 Alton Road, Suite 511

Address

Miami Beach, FL 33139

City/State and Zip Code

Kalbanes@yahoo.com

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

For further information concerning this matter, please call:

Kimberly Ginsburg

at (305) 790-8428

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2016 APR 27 PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 22, 2016

KIMBERLY A GINSBURG
400 ALTON ROAD, SUITE 511
MIAMI BEACH, FL 33139

SUBJECT: CASENTIALS, LLC
Ref. Number: L15000012700

We have received your document for CASENTIALS, LLC and your check(s) totaling \$25.00. 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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 716A00005879

FILED

16 APR 27 AM 9:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Casentials, LLC

2. (a) _____ Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>400 Alton Road, Suite 511</u> <u>Miami Beach, FL 33139</u>	(b) _____ Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>400 Alton Road, Suite 511</u> <u>Miami Beach, FL 33139</u>
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3. _____ Date of filing/registration in Florida	4. _____ Document number
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5. (a) Kimberly Albanes Ginsburg, Esq.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

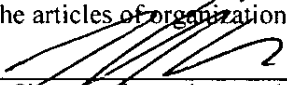
Kimberly Albanes Ginsburg, Esq.
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
501 Brickell Key Drive, Suite 300
Miami, FL 33131

(b) Kimberly Albanes Ginsburg, Esq.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
400 Alton Road, Suite 511
Miami Beach, FL 33139

FILED
16 APR 27 AM 9:01
CLERK 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

Kimberly A. Ginsburg

Printed or typed name of signer

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