

L15000180904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

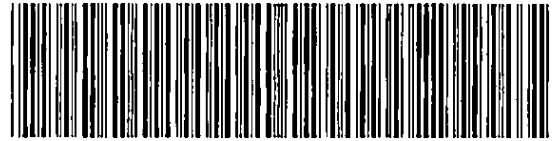
(Document Number)

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*[Handwritten signature]*

7-02



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 9, 2024

JEROME RAMSARAN  
1200 BRICKELL AVENUE, SUITE 1950  
MIAMI, FL 33131

SUBJECT: CONSUMER LAW GROUP LLC  
Ref. Number: L15000180904

We have received your document for CONSUMER LAW GROUP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Morgan E Lovett  
Regulatory Specialist II

Letter Number: 424A00002968

Refund  
\$35.00

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Consumer Law Group 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:

Jerome Ramsaran

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

Jerome Ramsaran, P.A.

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

1200 Brickell Avenue, Suite 1950

\_\_\_\_\_  
Address

Miami, FL 33131

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

jerome@ramsaranlawgroup.com

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

For further information concerning this matter, please call:

Jerome Ramsaran

at ( 305 )

988-3065

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

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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**

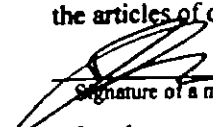
*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: Consumer Law Group, LLC
2. (a) 1031 Ives Dairy Road  
Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
Suite 228  
Miami, FL 33179
- (b) 1031 Ives Dairy Road  
Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
Suite 228  
Miami, FL 33179
3. 10/23/2015 Date of filing/registration in Florida
4. L15000180904 Document number

5. (a) Jerome Ramsaran  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
12550 Biscayne Blvd  
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
Suite 800  
North Miami, FL 33181

- (b) Jerome Ramsaran, P.A.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
1200 Brickell Avenue  
NEW Registered Office Address:  
Suite 1950  
Miami, FL 33131

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

Jerome Ramsaran  
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

Jerome Ramsaran for Jerome Ramsaran, P.A.

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