

L16000035024

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(Address)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** REDMAN ON THE SEA, 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:

Patrice A. Tedesco, Esq.

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

Myron E. Siegel, P.A.

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

1055 S. Federal Hwy

\_\_\_\_\_  
Address

Hollywood, FL 33020

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

patrice@siegelaw.com

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

For further information concerning this matter, please call:

Patrice A. Tedesco

954

703-1653

at ( )

\_\_\_\_\_  
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

December 16, 2016

PATRICE TEDESCO  
1055 S FEDERAL HWY  
HOLLYWOOD, FL 33020

SUBJECT: REDMAN ON THE SEA, LLC  
Ref. Number: L16000035024

RECEIVED  
2017 JAN -5 PM 1:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for REDMAN ON THE SEA, 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), 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.

Octavia I Simmons  
Regulatory Specialist II

Letter Number: 516A00026822

**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: REDMAN ON THE SEA, LLC

2. (a) \_\_\_\_\_

Principal office address of limited liability company:

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

1000 E. HALLANDALE BEACH BLVD. SUITE

HALLANDALE BEACH, FL 33009

(b) \_\_\_\_\_

Mailing address of limited liability company:

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

1000 E. HALLANDALE BEACH BLVD. SUITE

HALLANDALE BEACH, FL 33009

02/19/2016

L16000035024

3. \_\_\_\_\_ Date of filing/registration in Florida

4. \_\_\_\_\_ Document number

5. (a) Myron E. Siegel, P.A.

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1920 E. Hallandale Beach Blvd, Suite 801

Hallandale Beach, FL 33009

(b) Myron E. Siegel

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

Myron E. Siegel, P.A.

**NEW Registered Office Address:**

1055 S. Federal Hwy

Hollywood, FL 33020

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]  
Signature of a member or authorized representative of a member

KATRICE A. TEDESCO, ESQ.  
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]  
Signature of Registered Agent

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

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