

L16000076252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

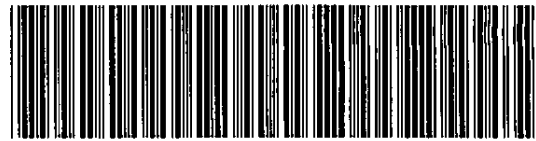
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA

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OCT 21 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Levy Firm PLLC  
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:

Geoffrey Levy  
Name of Person

The Levy Firm PLLC  
Firm/Company

4801 South University Drive Suite 118  
Address

Davie FL 33328  
City/State and Zip Code

thelevyfirmpllc@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Geoffrey Levy at ( 954 ) 849 - 8386  
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

INHS18 (2/14) \$35 already sent



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 23, 2016

GEOFFREY LEVY, ESQUIRE  
THE LEVY FIRM PLLC  
4801 S. UNIVERSITY DRIVE, SUITE 118  
DAVIE, FL 33328

SUBJECT: THE LEVY FIRM PLLC  
Ref. Number: L16000076252

We have received your document for THE LEVY FIRM PLLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

You have completed the form for a corporation not an LLC.

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.

Nanette Causseaux  
Regulatory Specialist II Supervisor

Letter Number: 816A00020493

**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: The Levy Firm PLLC

2. (a) 4801 South University Drive Suite 118 (b) 4801 South University Drive Suite 118  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Davie, FL 33328 Davie, FL 33328

3. 4/19/16 4. L16000076252  
Date of filing/registration in Florida Document number

5. (a) Corporate Creations Network, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
11380 Prosperity Farms Road #221E  
Palm Beach Gardens, FL 33410

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

NEW Registered Office Address:  
4801 South University Drive Suite 118  
Davie, FL 33328

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] Geoffrey Levy  
Signature of a member or authorized representative of a member 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]  
Signature of Registered Agent