

L16060081408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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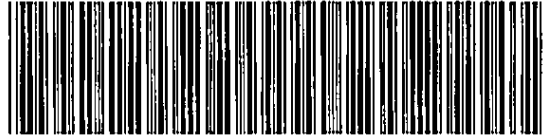
(Business Entity Name)

(Document Number)

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MAY 25 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE FRENCH PALM 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:

Axel SEZER

Name of Person

THE FRENCH PALM LLC

Firm/Company

1520 Union avenue

Address

Redwood City CA 94061

City/State and Zip Code

axel16r@gmail.com

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

For further information concerning this matter, please call:

Axel SEZER

at (650) 3009339

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

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 FRENCH PALM LLC

2. (a) 931 NE 48 st (b) 1520 Union avenue

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Oakland Park

Redwood City

FL 33334

CA 94061

07/14/2016

CP 575 B

3. Date of filing/registration in Florida

4. Document number

5. (a) Swyft Filings

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

931 NE 48 st

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Oakland Park, FL 33334

(b) Axel SEZER

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

931 NE 48 st

NEW Registered Office Address:

Oakland Park, FL 33334

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

Aline SEZER

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

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