

L16000115193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

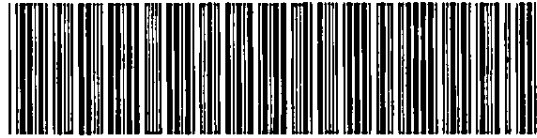
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

own RA

Office Use Only



800301493578

07/21/17--01015--011

25.00

FILED
17 AUG -8 PM 3:24
CLERK OF COURT
JANET L. H. O'NEILL

S. WARREN

AUG 09 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2017

BRYAN GROSMAN
315 NORTH FEDERAL HIGHWAY
HOLLYWOOD, FL 33020

SUBJECT: AMERICAN FEDERATED TITLE COMPANY LLC
Ref. Number: L16000115193

We have received your document for AMERICAN FEDERATED TITLE COMPANY 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 517A00015333

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMERICAN FEDERATED TITLE COMPANY 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:

Bryan Grosman

Name of Person

AMERICAN FEDERATED TITLE COMPANY LLC

Firm/Company

315 North Federal Highway

Address

Hollywood, Florida 33020

City/State and Zip Code

ev@brycorholdings.com

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

For further information concerning this matter, please call:

Bryan Grosman at (954) 458-2826

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: AMERICAN FEDERATED TITLE COMPANY LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

5500 Washington Street

5500 Washington Street

Hollywood, Florida 33021

Hollywood, Florida 33021

06/14/2016

L16000115193

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

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

GROSMAN, BRYAN ESQ

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1051 NW 3rd Street

Hallandale, FL 33009

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

Hollywood RA Services LLC

NEW Registered Office Address:

5500 Washington Street

Hollywood, FL 33021

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

Bryan Grosman

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

FILED
17 AUG - 8 PM 3:24
STATE
OF FLORIDA