

L16000216853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

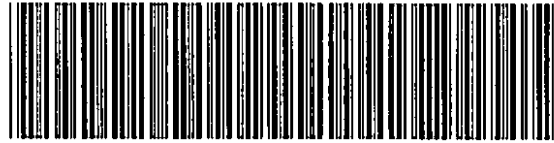
(Business Entity Name)

(Document Number)

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08/11/17--01006--003 **25.00

FILE
2017 AUG 11 PM 2:09
FALLMUSSEY ELECTRONIC

AUG 14 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cobalt Financial Group LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Zion Binyaminov

(Contact Person)

Cobalt Financial Group LLC

(Firm/Company)

1100 Park Central Blvd S suite 2450

(Address)

Pompano Beach, FL 33064

(City/State and Zip Code)

For further information concerning this matter, please call:

Michel Moore

(Name of Contact Person)

844

8986757

at ()

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: COBALT FINANCIAL GROUP LLC
2. The Florida document/registration number assigned to this limited liability company is:
L16000216853
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/30/2017

4. I, AHARON BINYAMINOV, hereby withdraw/resign as a
(Print Name of Person Resigning)

AMBR

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILE
2017 AUG 11 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L960000000684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

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08/11/17--01006--027 **25.00

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2017 AUG 11 PM 2:06
FALL RIVER, MA
FALL RIVER, MA



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS
From: Ashley Jiminez ashley.jiminez@cscglobal.com
Date: August 9, 2017
Order#: 758930/048
Re: SINGER ISLAND MARINE CO., L.C.

Enclosed please find:

XX Change of Registered Agent and Office.
XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.
XX Issue Proof of Filing.
XX Return Regular Mail in the enclosed envelope.

Attn: Ashley Jiminez
c/o Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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: SINGER ISLAND MARINE CO., L.C.

2. (a) 241 BRADLEY PLACE (b) 241 BRADLEY PLACE
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

PALM BEACH, FL 33480

PALM BEACH, FL 33480

06/24/1996

L96000000684

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

5. (a) UNITED CORPORATE SERVICES, INC.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

9200 SOUTH DADELAND BLVD.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

SUITE 508

MIAMI, FL 33480

(h) Corporation Service Company
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1201 Hays Street

NEW Registered Office Address:

Tallahassee, FL 32301

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2017 AUG 11 PM 2:06
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

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.

/s/Oliver R. Grace, Jr.

Signature of a member or authorized representative of a member

Oliver R. Grace, Jr., Authorized Person

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.

Grace E. Kirby
Signature of Registered Agent Corporation Service Company By: Grace E. Kirby, Asst. Vice President

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