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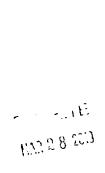
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

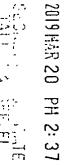
Office Use Only

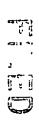


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2 VIII - 15 (17)







COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Division of Corporations	
SURFECT: ZOZ DAM T	CAIL, LLC
SUBJECT:	Liability Company
Name of Entitled	islaniky company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change at	nd fee(s) are submitted for filing.
Di J	oo following:
Please return all correspondence concerning this matter to the	ic following.
RICHARD D. TICKTIN	
Name of Person	
202 DAM TRAIL, LLC	
2.02 DAM TRAIL, LLC Firm/Company	
7-1-1-2 54	
3201 SW 42 ST Address	
Address	
FT. LAUDERDALE, FL 33312	
City/State and Zip Code	***************************************
•	
Cichard @ Synurgylabs. com E-mail address: (to be used for future annual report no	·
E-mail address: (to be used for future annual report no	rtification)
For further information concerning this matter, please call:	
RICHARD TICKTIN at (95	7 <u>525-1133</u>
Name of Person	Area Code & Daytime Telephone Number
5:11221, 55 51121	MAILING ADDRESS:
G	Registration Section Division of Corporations
= · · · · · · · · · · · · · · · · · · ·	P.O. Box 6327
S	Tallahassee, Florida 32314
Tallahassee, Florida 32301	•
Enclosed is a check for the following amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy
₩ 323 rining rec	\$33 Fitting Fee or Continued 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.

. Na	me of the limited liability company: 202 DAM	4 TRAIL, LLC
(a)	ATTN: RICHARD TICKTIN	(b) ATTW: RICHARD TICKTIN
. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3201 SW 42 ST	3201 SW 42 ST
	FT. LAUNERDAZE, FL 33312	FT. LAUDERDALE, FL3531
	7/12/2018	418000168171
	Date of filing/registration in Florida 4.	. Document number
(a)	MLG SERVICES LLC	
. (u)	Registered Agent and Registered Office shown on the records of the Flo	orida Dept. of State:
	7284 W PALMETTO PARK	c RD
	Registered Office Address (MUST BE FLORIDA STREET ADDR.	
	SCITE 101	
	BOCA FATON ,FL 3	 33 4 3 3
(b)	RICHARD T. TICKTIN	2019 HAR
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office	re address:
		e p fil
	NEW Registered Office Address:	2
	3201 SW 42 ST	37
	FT. LAUDERDACE , FL 3	
ne cha gent v vas/we	imited liability company is not organized under the laws of ange or changes are made, the Florida street address of the rewill be identical. Or, in the case of a Florida limited liability are authorized by an affirmative vote of the members of the icles of organization of the operating agreement of the limited	registered office and the business office of the registered ty company, it is hereby confirmed that the change(s) timited liability company or as otherwise provided in
		RICHARD D. TICKTIN
Signa	ture of a member or authorized representative of a member	Printed or typed name of signee
rovisi he obl o mere	by accept the appointment as registered agent and agree to ions of all statutes relative to the proper and complete perfo ligations of my position as registered agent as provided for ely reflect a change in the registered office address. I hereb d in writing af this change.	act in this capacity. I further agree to comply with the ormance of my duties, and I am familiar with and accept in Chapter 605, F.S. Or, if this document is being filed by confirm that the limited liability company has been
onjie.	/	, σ , σ, γ, γ