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> FILED 18 OCT 22 PN 6: 48 SECRETANY OF STATE FALLAHASSEE, FLORIDA

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#### **COVER LETTER**

TO: Registration Section Division of Corporations

## SUBJECT: SCALE LAW PARTNERS 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:

Jaime Guttman

Name of Person

Scale Law Partners, LLC

Firm/Company

800 Brickell Avenue, PH2

Address

Miami, FL 33131

City/State and Zip Code

## jaime@scale.law

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

For further information concerning this matter, please call:

Jaime Guttman	305 515-0263
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following am	ount:
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

-11LED

## 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. N	ame of the limited liability company: SCALE LAW	PARTNERS LL	C
2. (a)			
	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	800 Brickell Avenue, PH2	800 Brid	ckell Avenue, PH2
	Miami, FL 33131	Miami, I	FL 33131
	08/08/2018	L180001	90096
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Jaime Guttman		18 18
J. (u,	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of Stat	
	Registered Office Address (MUST BE FLORIDA STREET 600 Brickell Avenue	ADDRESS)	OCT 22 PH
	Miami . Fi	33131	6: 48
(b)	Jaime Guttman Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:	-
	NEW Registered Office Address:		-
	800 Brickell Avenue, PH2		_
	Miami, FI	_ <u>33131</u>	_
the cha agent - was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registered offic iability company, it i of the limited liabilit	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	J.J.	Jaime Guttm	
I here provis the ob to mer notifie	nure of a member or authorized representative of a member by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address. I d in writing of this change.	e performance of my	duties, and I am familiar with and accept

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