

L1900000 94305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

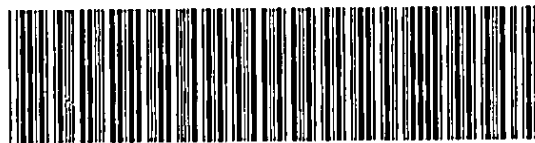
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 18 2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 MAR 16 PM 11:27

March 9, 2020

ROBERT DUBMAN
8667 TIERRA LAGO COVE
LAKE WORTH, FL 33467

SUBJECT: RSVP ENTERTAINMENT OF SOUTH FLORIDA, LLC
Ref. Number: L19000094305

We have received your document for RSVP ENTERTAINMENT OF SOUTH FLORIDA, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 920A00005101

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RSVP ENTERTAINMENT OF SOUTH FLORIDA

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:

ROBERT DUBMAN

Name of Person

RSVP ENTERTAINMENT OF SOUTH FLORIDA

Firm/Company

667 Tierra Lago Cove

Address

Lake Worth, Florida 33467

City/State and Zip Code

rdub3@msn.com

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

For further information concerning this matter, please call:

Robert Dubman

at (561)

693-3459

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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.*

Name of the limited liability company: RSVP ENTERTAINMENT OF SOUTH FLORIDA

(a) <u>Principal office address of limited liability company:</u> <i>(Note: MUST BE STREET ADDRESS)</i> <u>8667 Tierra Lago Cove</u> <u>Lake Worth, FL 33467</u>	(b) <u>Mailing address of limited liability company:</u> <i>(Note: MAY BE POST OFFICE BOX)</i> <u>8667 Tierra Lago Cove</u> <u>Lake Worth, FL 33467</u>
<u>April 5, 2019</u> Date of filing/registration in Florida	<u>119000094305</u> Document number


(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State.
REGISTERED AGENTS, INC.
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
7901 4th St N STE 300
St. Petersburg, FL 33702

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
ROBERT DUBMAN
NEW Registered Office Address:
8667 Tierra Lago Cove
Lake Worth, FL 33467

*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)
is/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.*

<u></u> Signature of a member or authorized representative of a member	<u>ROBERT DUBMAN</u> Printed or typed name of signer
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*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
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 of Registered Agent

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

2020 MAR 16 PM 5:11
STATE
OFFICE
TALLAHASSEE, FL