119000148061

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 16, 2020

NEIL FINKELSTEIN 401 SW 4TH AVE 201 FT LAUDERDALE, FL 33315

SUBJECT: NEIL FINKELSTEIN MANAGEMENT CONSULTING LLC

Ref. Number: L19000148061

We have received your document for NEIL FINKELSTEIN MANAGEMENT CONSULTING 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) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 220A00011797

Attached is
The new information
requested requested reducted reducted -

www.sunbiz.org

COVER LETTER

Division of	Corporations						
Neil Fi	nkelstein Management Cons	ulting LLC					
	Name of Limited Liability Company						
Dear Sir or Madam:	:						
The enclosed Regis	tered Agent/Registered Of	fice Change and fe	ee(s) are submitted for filing.				
Please return all cor	respondence concerning th	nis matter to the fo	ellowing:				
Neil Finkelstein							
	Name of Person		_				
Neil Finkelstein Man	agement Consulting LLC						
	Firm/Company		_				
401 SW 4th Ave20	ı						
	Address						
FT Lauderdale, FL 33	3315						
	City/State and Zip Code		_				
neilfinkelstein0@gma	ail.com						
E-mail addres	s: (to be used for future an	nual report notific	ation)				
For further informa	tion concerning this matter	r, please call:					
Neil Finkelstein		914 at (954 1999				
Nai	me of Person	W (Area Code & Daytime Telephone Number				
Mailing A	ddress:		Street Address:				
Registration Section			Registration Section				
Division of Corporations			Division of Corporations				
P.O. Box 6327			The Centre of Tallahassee				
Tallahasse	e, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	s a check for the followin	g amount:					
🗅 \$25 Filir	S \$25 Filing Fee - ATTacked S \$25 Filing Fee & Certified Copy S \$25 Filing Fee & Certified Copy Cashed Check						
INHS18 (2/14)	Cashed Chedi						

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. Na	me of the limited liability company: Neil Finkelstei	n Managem	ent Consultin	g LLC	
2. (a)	401 SW 4th Ave-201-FT Lauderdale, FL 33315		(b) 401 SW 4th Ave-201-Ft Lauderdale, FL 33315 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\			
	401 SW 4th Ave201- Ft Lauderdale, FL 33315	.	401 SW 4tl	h Ave201Ft Lauderdale, FL 33315	
					
	June 23, 2020		L190001480	061	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	United States Corporation Agents, Inc			ļ	
J. (u)	Registered Agent and Registered Office shown on the records	of the Floric	a Dept. of State	• ·	
	13302 Winding Oak Court A-Tampa, FL 33612				
	Registered Office Address (MUST BE FLORIDA STREET	ET ADDRES	<u>S)</u>	-	
	13302 Winding Oak Court A				
	Tampa	FL_33612	<u> </u>	,	
		-			
(b)				- ~	
	Enter name of NEW Registered Agent and/or NEW Registe	red Office a	ddress:	6	
	Neil Finkelstein				
	NEW Registered Office Address:			- -	
	401 SW 4th Ave201				
	Ft Lauderdale	FI 33315			
change agent v was/w	imited liability company is not organized under the cor changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membericles of organization or the operating agreement of the following agreement of t	the register lliability c rs of the lit he limited	red office and ompany, it is nited liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in	
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obi to mer	by accept the appointment as registered agent and considered agent and considered agent and completions of my position as registered agent as proviety reflect a change in the registered office address, d in writing of this change.	agree to ac ele perforn ded for in I hereby c	t in this cape vance of my c Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been	
Signatu	ire of Registered Agent				