

L19000209 837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

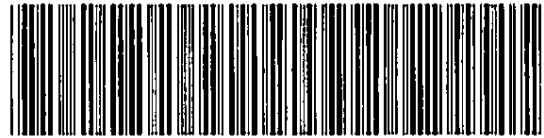
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RA Change

JAN 28 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 7760 NW 36 St, 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:

Gustavo de Zendegui

Name of Person

Zendegui Law Group

Firm/Company

1111 Kane Concourse Suite 310

Address

Bay Harbor Islands, FL 33154

City/State and Zip Code

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

For further information concerning this matter, please call:

Gustavo de Zendegui

Name of Person

at (305)

579-3333

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

JNHS18 (2/14)

20 JUN 27 PM 4:39
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CLERK OF STATE
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2020

GUSTAVO DE ZENDEGUI
ZENDEGUI LAW GROUP
1111 KANE CONCOURSE, SUITE 310
BAY HARBOR ISLANDS, FL 33154

SUBJECT: 7760 NW 36 ST, LLC
Ref. Number: L19000209837

We have received your document for 7760 NW 36 ST, 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):

We must have a signature from the new registered agent accepting the designation of registered agent not the old one.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 420A00001008

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

2020 JAN 27 AM 11:12

**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: 7760 NW 36 St, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

1835 E Hallandale Beach Blvd #282

Hallandale Beach, FL 33009

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

1835 E Hallandale Beach Blvd #282

Hallandale Beach, FL 33009

8/16/19

L19000209837

3. Date of filing/registration in Florida

4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Dean Bardino

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1835 E Hallandale Beach Blvd #282

Hallandale Beach, FL 33009

(b) Todd Sims
Enter name of NEW Registered Agent and/or NEW Registered Office address:

MNS Alpha II, LLC

NEW Registered Office Address:

1680 Michigan Avenue Suite 700

Miami Beach, FL 33139

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.

[Signature]
Signature of a member or authorized representative of a member

Todd Sims
Printed or typed name of signee

I hereby accept the appointment of 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.

[Signature]
Signature of Registered Agent

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

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DIVISION OF STATE
CORPORATIONS
20 JAN 27 PM 4:39