

L19000284210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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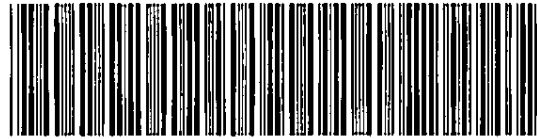
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section  
Division of Corporations \*

SUBJECT: Mindful Mental Health Services  
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:

Danae Koeper  
Name of Person

Mindful Mental Health Services  
Firm/Company

5380 GOLF of Mexico Dr A202  
Address

Longboat Key, FL 34228  
City/State and Zip Code

danae@mindfulmentalhealthservices.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danae Koeper at (941) 879-2970  
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.

1. Name of the limited liability company: Mindful Mental Health Services
2. (a) 5380 Gulf of Mexico Dr A202 (b) Same  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
Longboat Key, FL 34228
3. 11/14/19 Date of filing/registration in Florida 4. 49000284210 Document number
5. (a) Danae Koepfer  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

5380 Gulf of Mexico Dr A202 <sup>ont OK</sup>  
Longboat Key, Ste. 105 FL 34228

(b) Mitchell Greenberg  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

5380 Gulf of Mexico Dr  
Longboat Key Ste: 105  
FL 34228

**NEW Registered Office Address:**

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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.

Danae Koepfer  
Signature of a member or authorized representative of a member

Danae Koepfer  
Printed or typed name of signee

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 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.

Mitchell Greenberg  
Signature of Registered Agent