

L20000110126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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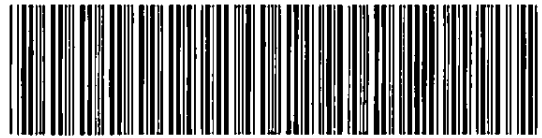
(Business Entity Name)

(Document Number)

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2023 MAY -8 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KOCHMAN & ZISKA PLC

Ronald S. Kochman*
Maura A. Ziska
Alexander D. Kochman

*Also admitted in New York

Esperanté
222 Lakeview Avenue, Suite 1500
West Palm Beach, Florida 33401

Telephone: (561) 802-8960
Facsimile: (561) 802-8995

May 2, 2023

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

Re: ***Beside Myself Limited Liability Company***
Document #L20000110126

Dear Sir/Madam:

Enclosed is a Statement of Change of Name of Registered Agent (name was originally misspelled) for the above-referenced LLC. Also enclosed is a check in the amount of \$25.00, representing the filing fee.

If you have any questions, please contact this office.

Sincerely,


Kelly J. Smith,
Certified Legal Assistant

Enclosures

00054345 DOC

**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: Beside Myself Limited Liability Company

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

1100 S Flagler Drive, Suite 1701

West Palm Beach, FL 33401

4/22/2020

L20000110126

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:

Ronald S. Kockman

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

222 Lakeview Avenue, Suite 1500

West Palm Beach, FL 33401

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

Ronald S. Kochman

NEW Registered Office Address:

_____, FL _____

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

Ronald S. Kochman

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.

[Signature]
Signature of Registered Agent

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

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