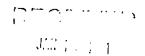
LZ0000204086

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

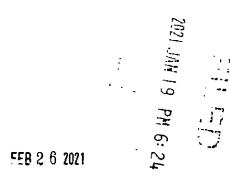
Office Use Only



900358119199



01/20/21--01003--010 **25.00



S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations						
Leadership Strategies, LLC SUBJECT:	*** **** *** *** *** *** *** *** *** *					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.					
Please return all correspondence concerning t	his matter to the following:					
Bev Halperin						
Name of Person						
Leadership Strategies						
Firm/Company						
54 St James Drive						
Address	·					
Palm Beach Gardens, FL 33418						
City/State and Zip Code						
bevhalperin@gmail.com						
E-mail address: (to be used for future an	nual report notification)					
For further information concerning this matte	r, please call:					
Bev Halperin	508 320 2825 at ()					
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 followin	g amount:					
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

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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.

l. Na	ame of the limited liability company: Leadership Strateg	gies, LLC	2			
2. (a)	54 St James Drive, Palm Beach Gardens, FL 33418	a	54 St.	James Drive, Palm Beach	s Drive, Palm Beach Gardens, FL 33418	
. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limit (Note: MAY BE PO.		
	07/14/2020	_)204086		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Bev Halperin					
. (=)	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of	State:		
	Beverly Halperin				<i>L</i> -3	
	Registered Office Address (MUST BE FLORIDA STREET A	IDDRES:	<u>S)</u>		2021 JAK	
	124 Sunset Cove Lane				7 7.724 7.78	
	Palm Beach Gardens	33418				
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : Beverly Halperin				PH 6: 24	
	NEW Registered Office Address:					
	54 St James Drive					
	Palm Beach Gardens, FL	33418				
hange gent v vas/we he arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law.	registero bility co f the lin limited l	ed office impany, nited liab	e and the business office it is hereby confirmed bility company or as oth company.	e of the registered that the change(s)	
Signa	ture of a member or authorized representative of a member		2r	Printed or typed name	of signee	
l herei provisi he obl o mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided elv reflect a change in the registered office address, I had in writing of this change, are of Registered Agent	ee to act perform I for in (ereby co	in this c ance of i Chapter onfirm th	capacity. I further agre my duties, and I am fan 605, F.S. Or, if this do hat the limited liability i	ve to comply with the niliar with and accept cument is being filed company has been	