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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Surfside 807, Name of Limited	LL C	
Name of Limited	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change ar	nd fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the	e following:	
Elliot Ehrlich Name of Person		
Firm/Company		
3511 N. 52rd Ave	2022 AUG -	
City/State and Zip Code	2022 AUG - 1 AH 8: 2	
E-mail address: (to be used for future annual report no		
For further information concerning this matter, please call:		
Elliot Ehrlich at ( )	18) 866-8082 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 Fiting 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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	Surfside	807, 46	
2. (a) Elliot Ehrli	<u>ch</u> (b)	E//10	t Ehrlich
Principal office address of limited liabili ( <u>Note: MUST BE STREET ADD</u>		(Note: MAY	of limited liability company; BE POST OFFICE BOX)
3511 N. 52nd	Ave	3511 A	1. 52~1 Ane ud FL 3302
Itollywood FC	33021	Hllywoo	79 Er 3305
8/11/2020		La 000	0242558
3. Date of filing/registration in Fl	lorida 4.	Document no	umber
5. (a) Charles S.	Serfaty		
5. (a) Charles 5.  Registered Agent and Registered Office shown	on the records of the florida	Dept. of State:	
Registered Office Address MUST BE FLO  MIGHT  MIGHT  (b) Enter name of NEW Registered Agent and/or in	ne Bouleva FL 3	and, Suite 19 3137	ZOZZ AUG - 1 AM 8: 26
NEW Registered Office Address:  35// // //	52nd An	e	
Itollywood	FL_33	3021	
If the limited liability company is not organized change or changes are made, the Florida street agent will be identical. Or, in the case of a Flowas/were authorized by an affirmative vote of the articles of organization or the operating agrangement of a member or authorized representative of a hereby accept the appointment as registered provisions of all statutes relative to the proper the obligations of my position as registered agree to merely reflect a change in the registered off notified in writing of this change.	address of the registered prida limited liability cout the members of the limited limi	d office and the business inpany, it is hereby confited liability company of ability company	s office of the registered firmed that the change(s) r as otherwise provided in Education of signee

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

Signature of Registered Agent