

L21 000535042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP      ☐ WAIT      ☐ MAIL

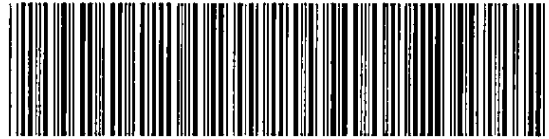
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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ALLHIESSE: FLOHÖA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RIBEN PROPERTIES 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:

Edward Gitlin

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

267 Beach 141st St

\_\_\_\_\_  
Address

Belle Harbor, NY 11694

\_\_\_\_\_  
City/State and Zip Code

edgitlin@gmail.com

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

For further information concerning this matter, please call:

Edward Gitlin

at ( 917 ) 733-7908

\_\_\_\_\_  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 19, 2024

EDWARD GITLIN  
267 BEACH 141ST ST  
BELLE HARBOR, NY 11694

SUBJECT: RIBEN PROPERTIES LLC  
Ref. Number: L21000535042

We have received your document for RIBEN PROPERTIES 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):

Only (1) person may serv as the Registered Agent.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 724A00015868

*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.*

2. (a) 5154 MEDORAS AVENUE, ST. AUGUSTINE, FL 32080  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

(b) 267 BEACH 141ST ST, BELLE HARBOR, NY 11694  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

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\_\_\_\_\_

|  |                           |
|--|---------------------------|
| Feb 06, 2024                                     | L21000535042              |
| 3. <u>Date of filing/registration in Florida</u> | 4. <u>Document number</u> |

5. (a) ZENBUSINESS INC.  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
 336 E. COLLEGE AVE., SUITE 301, TALLAHASSEE, FL 32301  
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

\_\_\_\_\_, FL \_\_\_\_\_

(b) Edward Gitlin

Enter name of NEW Registered Agent and/or NEW Registered Office address:

\_\_\_\_\_

NEW Registered Office Address:

5154 MEDORAS AVENUE

\_\_\_\_\_

ST. AUGUSTINE

\_\_\_\_\_, FL 32080

2024 AUG 20 AM 9:42  
TALLAHASSEE, FLORIDA

~~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 of a member or authorized representative of a member \_\_\_\_\_ Edward Gittlin  
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 603, 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 of Registered Agent