

M11000005941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

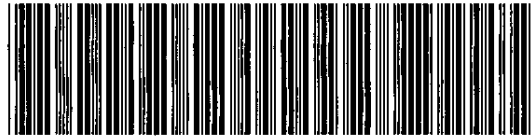
(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 MAY -2 PM 4:24

FILED

Norris
McLaughlin
& Marcus, P.A.
ATTORNEYS AT LAW

April 27, 2012

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: MY/VIVERE, LLC

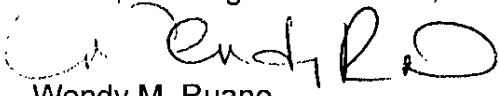
Dear Sir/Madam:

I enclose for filing a Statement of Change of Registered Agent for MY/VIVERE, LLC together with a check in the amount of \$25.00. Please process and return a stamped-filed copy in the envelope provided.

Thank you.

Very truly yours,

Norris, McLaughlin & Marcus, PA


Wendy M. Ruano
Legal Assistant

Cc: Mr. Philip Rinaldi
Michael R. Karcher, Esq.
Nicholas F. Pellitta, Esq.
David B. Cronheim, Esq.



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: MY/VIVERE, LLC

2. (a) Principal office address of limited liability company: _____

(Note: MUST BE STREET ADDRESS)

1097 Westbrook Road
Bridgewater, New Jersey 08807

(b) Mailing address of limited liability company: Nicholas F. Pellitta, Esq.

(Note: MAY BE POST OFFICE BOX)

721 Route 202-206, Ste. 200
Bridgewater, New Jersey 08807

November 23, 2011
3. Date of filing/registration in Florida

M1000005941
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: David B. Cronheim, Esq.

Registered Office Address: 5690 Winged Foot Drive
Suatt, Florida 34997

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

NEW Registered Agent: Michael R. Karcher, Esq.

NEW Registered Office Address: 888 S.E. Third Avenue
(MUST BE FLORIDA STREET ADDRESS) Suite 300
Fort Lauderdale, FL 33316

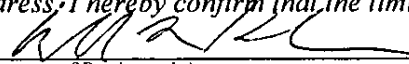
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by the 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

David B. Cronheim, Esq.

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity and 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 608, 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

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

FILED
MAY - 2 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA