

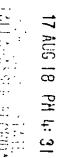
(Řequ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Docu	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



100300118021

06/08/17--01019--031 **25.00



S. WARREN AUG 2 2 2017



August 2, 2017

YOGEV KARNY 1800 NORTH BAYSHORE DR, UNIT 3810 MIAMI, FL 33132

SUBJECT: FIRST PREMIER EQUITY LLC

Ref. Number: M14000004732

We have received your document for FIRST PREMIER EQUITY 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):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 917A00015661

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

· · · · · · ·

TO: Registration Section Division of Corporations			
SUBJECT: FIRST PRE-MICA EQUITY LL C. 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:			
Name of Person			
FIRST PEEMICA GUITY LL C			
1800 NORTH BAY SHORE DR. UNIT 3810 Address			
MIAMI FL 33132 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Person at (305) 577 o 959 Area Code & Daytime Telephone Number			
Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section			
Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
☐ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)

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. Na	ame of the limited liability company: FIRST PREMIER EQUITY, LLC.	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) 1800 North BAY SHORE DR. VNI Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	<u>J</u> 8/0
	MIAMI, FL 33132 MIAMI, FL 33132	_
	07/02/2014 M1400000 473 Date of filing/registration in Florida 4. Document number	
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:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
(b)	FORT LAVINADAL FL 33301 SEAN (ARY Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	1800 NORTH BAY SHORE DR. UNIT 3810	
	MIAMI FL 33132	
the cha agent w was/we	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registe will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in ticles of organization or the operating agreement of the limited liability company.	
	ature of a member of authorized representative of a member Printed or typed name of signee	
Signa	ature of a member of authorized representative of a member Printed or typed name of signee	
provisi the obl to merc	thy accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with to sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and acceptions of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being fit rely reflect a change in the registered office address. I hereby confirm that the limited liability company has been ad in writing of this change.	te ipt id
Signatu	ure of Kygistered Agent	