

M14000007669

(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



800274071988

06/30/15--01021 --006 **25.00

FILED
2015 JUN 30 PM 1:44
CLERK OF STATE
ALABAMA

JUL 01 2015

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRADENTON POOH 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:

Carol Glospie

Name of Person

Newco Corp. Services

Firm/Company

274 Madison Avenue, Suite 801

Address

New York, NY 10016

City/State and Zip Code

jgiamboi@mskyline.com

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

For further information concerning this matter, please call:

Carol Glospie

at (212) 356-8340

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

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. Name of the limited liability company: BRADENTON POOH LLC

2. (a) 101 West 55th St. New York, NY 10019 (b) same
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. 10/21/2014 4. M14000007669
Date of filing/registration in Florida Document number

5. (a) Platinum Filings LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
155 Office Plaza Dr.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tallahassee, FL 32301

(b) NRAI Services, Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
1200 South Pine Island Road

Plantation, FL 33324

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]
Signature of member or authorized representative of a member

Joseph J. Giamboi

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 605, 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.

NRAI Services, Inc.
By: [Signature]
Signature of Registered Agent

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

CAROL GLOSPIE
INHS18 (2/14)

FILED
2015 JAN 30 PM 1:44
TALLAHASSEE, FL 32301
CLERK OF STATE

**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. Name of the limited liability company: BRADENTON POOH LLC

2. (a) 101 West 55th St. New York, NY 10019
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) same
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 10/21/2014 Date of filing/registration in Florida
4. M14000007669 Document number

5. (a) Platinum Filings LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
155 Office Plaza Dr.
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

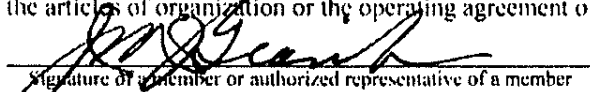
Tallahassee, FL 32301

(b) NRAI Services, Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
1200 South Pine Island Road

Plantation, FL 33324

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 member or authorized representative of a member

Joseph J. Giamboi

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 605, 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.

NRAI Services, Inc.

By:


Signature of Registered Agent

CAROL GLOSPIE

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

INHS18 (2/14)

FILED
2015 JAN 30 PM 1:44
TALLAHASSEE, FL 32301
DIVISION OF CORPORATIONS