# M1500002433

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(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP		
(Bu	siness Entity Nat	me)
(Do	cument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

#### TO: Registration Section Division of Corporations

SUBJECT: LINSDORF 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:

Ivan Parron

Name of Person

P & A Registered Agents, LLC

Firm/Company

8151 SW 143rd Street

Address

Palmetto Bay, FL 33158

City/State and Zip Code

ip@parronlaw.com

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

For further information concerning this matter, please call:

rron	305 459-3349 at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tailahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

## Enclosed is a check for the following amount:

S25 Filing Fee

\$55 Filing Fee & Certified Copy

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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.

(a)	17 STATE STREET STE 320	(b)	17 STATE STREET STE 320
· / -	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)
	NEW YORK, NY 10004		NEW YORK, NY 10004
	04/02/2015		M15000002433
(a)	Date of filing/registration in Florida P & A Registered Agents, LLC	4.	Document number
	Registered Agent and Registered Office shown on the records of 1360 Lugo Avenue	the Florida D	ept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	<u>'ADDRESS)</u>	
	Coral Gables FI	33156	The first is the ing
(b)	P & A Registered Agents, LLC		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registerer</u>	<u>d Office addr</u>	
	8151 SW 143rd Street		
	<u>NEW</u> Registered Office Address:		
	Palmetto Bay	. 33158	
	, Fl	L	
inge ent w s/we	imited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registered iability com of the limit	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
		Ivan P	arron as attorney-in-fact
	ture of a member or authorized representative of a member		Printed or typed name of signee
ierel wisi vohl	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide	ree to act ii 2 performan 2d for in Ch	i this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been -

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

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