

M15 000007122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

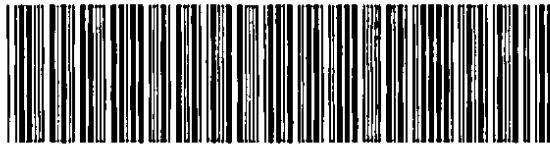
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TALLAHASSEE, FL

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MAR 08 2021

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** COMPASS FINANCIAL HOLDING GROUP, 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:

ARLEESIA L. MCDONALD

Name of Person

COMPASS HOLDING, LLC

Firm/Company

115 55 ST FL 4

Address

CLARENDON HILLS IL 60514

City/State and Zip Code

LEGAL@COMPASSHOLDING.NET

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

For further information concerning this matter, please call:

ARLEESIA MCDONALD

at ( 630 )

560-4890

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

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: COMPASS FINANCIAL HOLDING GROUP, LLC

2. (a) 115 55TH ST FL 4 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) CLARENDON HILLS, IL 60514 (b) 115 55TH ST FL 4 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) CLARENDON HILLS, IL 60514

3. SEPTEMBER 8, 2015 Date of filing/registration in Florida 4. M15000007122 Document number

5. (a) ROY DOBRASINOVIC Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 9700 MARTIN LUTHER KING, JR. ST., NORTH Registered Office Address (MUST BE FLORIDA STREET ADDRESS) ST. PETERSBURG, FL 33702

(b) COMPASS LEASE, LLC Enter name of NEW Registered Agent and/or NEW Registered Office address: 8514 N STATE ROAD 33 NEW Registered Office Address: LAKELAND, FL 33801

2021 JAN 25 AM 7:26

he limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the nge or changes are made, the Florida street address of the registered office and the business office of the registered nt 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 articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member ROY DOBRASINOVIC Printed or typed name of signer

reby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the isions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed irectly reflect a change in the registered office address, I hereby confirm that the limited liability company has been ied in writing of this change. Signature of Registered Agent