

MI7000001744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

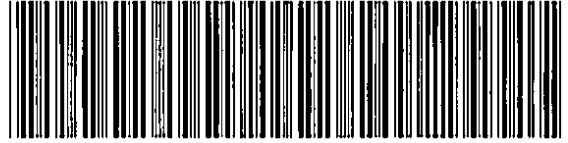
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

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CLERK OF SUPERIOR COURT

A. BUTLER

JUL 29 2022



COGENCYGLOBAL

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: **July 28, 2022**

Account#: I20000000088

Name: **KEN**

Reference #: **1747217**

Entity Name: **EMERALD PALMS VENTURE GP LLC**

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

ISSUES? CALL

KEN:

518-213-0738

Authorized Amount: **\$25.00**

Signature: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Emerald Palms Venture GP 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:

Sydne Garchik

Name of Person

MRK Partners Inc

Firm/Company

2711 N Sepulveda Blvd. #526

Address

Manhattan Beach, CA 90226

City/State and Zip Code

admin@mrkpartners.com

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

For further information concerning this matter, please call:

Cathy Coler

Name of Person

at (424)

999-4582

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

**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: Emerald Palms Venture GP LLC

2. (a) 101 SE 4th Avenue
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Delray Beach, FL 33483

(b) 2711 N Sepulveda Blvd. #526
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Manhattan Beach, CA 90266

3. March 01, 2017
Date of filing/registration in Florida

4. M17000001744
Document number

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

101 SE 4th Avenue
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
DelRay Beach, FL 33483

(b) COGENCY GLOBAL INC.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

115 North Calhoun Street, Suite 4
NEW Registered Office Address:
Tallahassee, FL 32301

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 a member or authorized representative of a member

Sydne Garchik
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.

Destiny Zelazo
Signature of Registered Agent

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

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2022 JUL 28 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FL