

6/30/2020

Division of Corporations

FLEXIBLE ORIGINAL

## Florida Department of State

FAX DATE OF 06/30.

Division of Corporations  
Electronic Filing Cover Sheet

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H200002034193ABCV

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY  
Account Number : I20000000195  
Phone : (850)521-0821  
Fax Number : (850)558-1515

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: \_\_\_\_\_

## LLC REGISTERED AGENT CHANGE

6509 99TH STREET LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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2020 JUL -8 AM 11:28

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# 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: 6509 99TH STREET LLC
2. (a) 30-50 Whitestone expressway , Ste 402, Flushing NY 1  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)
- (b) 30-50 Whitestone expressway , Ste 402, Flushing  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)
3. 6/3/2020  
Date of filing/registration in Florida
4. M20000004952  
Document number
5. (a) Corporation Service company  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
1201 Hays St.  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Tallahassee, FL 32301
- (b) NISIM DAYDOV  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
3606 Dorrit Ave  
NEW Registered Office Address:  
Boynton Beach, FL 33436

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.

NISIM DAYDOV

Signature of a member or authorized representative of a member

NISIM DAVYDOV

Printed or typed name of signer

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.

NISIM DAVYDOV

Signature of Registered Agent

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

FILED  
2020 JUL -30 PM 6:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA