

# N00000005852

(Requestor's Name)



MAIN OFFICE  
BET OVADIA  
CHABAD OF GROVE  
3713 Main Highway  
Coconut Grove, Fl. 33133

**CHABAD**  
OF SOUTH DADE

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(Business Entity Name)

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C. Coulllette JAN 07 2004

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FRIENDSHIP CIRCLE OF FLORIDA, INC.  
(Name of corporation)

**DOCUMENT NUMBER:** N00000005852

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:


Bruce Jacobs, Esq.  
(Name of person)

\_\_\_\_\_  
(Name of firm/company)

2971 Bird Avenue  
(Address)

Coconut Grove, FL 33133  
(City/state and zip code)

For further information concerning this matter, please call:

Menachem Fellig  at ( 305 ) 445-5444  
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Menachem Fellig  
(Printed or typed name and title)

Menachem Fellig  
(Signature of an officer or director)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

MAIL TO: MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314