

P000000014104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

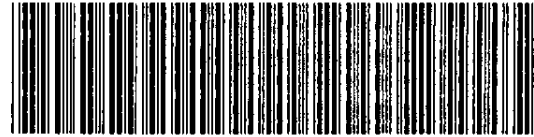
(Business Entity Name)

(Document Number)

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RA Change

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
3/8/11

COVER LETTER

FO: ~ Amendment Section
Division of Corporations

SUBJECT: Marseilles Management, Inc.
Name of Corporation

DOCUMENT NUMBER: P00000014104

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:

Robert Ragusa
Name of Contact Person

Marseilles Management, Inc.
Firm/Company

1741 Collins Avenue
Address

Miami Beach, FL 33
City/State and Zip Code

robertr@gomiamibeach.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Ragusa at (305) 503-1435
Name of Contact 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

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.

1. The name of the corporation: Marseilles Management, Inc.
2. The principal office address: 1849 James Avenue
Miami Beach, FL 33139
3. The mailing address (if different): 1741 Collins Avenue
Miami Beach, FL 33139
4. Date of incorporation/qualification: 02/09/2000 Document number: P00000014104
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Lloyd Mandell
1741 Collins Avenue
Miami Beach, FL 33139

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Steven Mandell
1800 Purdy Ave., PH4
P.O. Box NOT acceptable
Miami Beach, FL 33139

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

X 
Signature of an officer or director

Steven Mandell, PSD
Printed or typed name and title

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.

X 
Signature of Registered Agent

X MARCH 1, 2011
Date

If signing on behalf of an entity:

Steven Mandell
Typed or Printed Name

*** * * FILING FEE: \$35.00 * * ***