Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000218170 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tot

Division of Corporations

Fax Number

: (850) 617-6380

From:

Account Name

: DIVERSIFIED CORPORATE SERVICES INT'L, INC.

Account Number : I20090000024

Phone

: (518)434-2877

Fax Number

: (518)434-0943

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

jerry@diversifiedcorp.com

REGISTERED AGENT CHANGE 845 LINCOLN MANAGING MEMBER CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

SEP 11 2015

C LEWIS

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:

ŧ.

43

Amendment Section Division of Corporations

845 LINCOLN MANAGING MEMBER CORPORATION

SUBJECT:

Name of Corporation

DOCUMENT NUMBER.

203000006460

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:

JERRY JOSEPH

Name of Contact Person

DIVERSIFIED CORPORATE SERVICES

Firm/Company

18560 NORTH BAY ROAD

Address

SUNNY ISLES BEACH, FL 33160

City/State and Zip Code

jerry@diversifiedcorp.com

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

For further information concerning this matter, please call:

JERRY JOSEPH

518 \229-82

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

(((H15000218170 3)))

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

statement of change is submi	itted for a corporation (7.0502, 607.1508, or 617.1508, Florida Statutes, i organized under the laws of the State of FLORIDA	ifets
		registered agent, or both, in the State of Florida.	
1. The name of the corporati	on: 845 LINCOLN	MANAGING MEMBER CORPORAT	FION
2. The principal office addre	ss: C/O JENEL M	ANAGEMENT CORP.	
		NEW YORK, NY 10016	
3. The mailing address (if di	fferent):		
4. Date of incorporation/qua	lification: JANUARY	17, 2003 Document number. P030000064	60
5. The name and street addre Florida Department of Sta		ered agent and registered office on file with the esigned)	
DIVERS	IFIED CORPOR	ATE SERVICES INTL, INC.	
18560 N	IORTH BAY ROA	AD .	DIVIS
SUNNY	ISLES BEACH,	FL 33160	SEP SEP
6. The name and street addre (if changed):	es of the new registere	d agent (if changed) and /or registered office	10 AM
CRISTIN	A MOINELO C/O	CBA REALTY & MGMT CORP.	َ ۾
1948 HA	ARRISON ST., S	TE. 101	96
HOLLY	P.O. Bo NOOD, FL 3302	K NOT acceptable	
₹		street address of the business office of its register	
Such change was authorized authorized by the board, or	by resolution duly ad the corporation has be	opted by its board of directors or by an officer so en notified in writing of the change.	5
8/ DAVID DUSHEY		DAVID DUSHEY, DIRECTOR	————
Lhereby accept the appoint	ment as registered age	mi and agree to act in this capacity. I standed relative to the proper and complete and complete and complete and complete of the proper of the project as regis or reflect a change in the registered office address field in writing of this change.	tered 5, I
a/ CRISTINA MOINEL	.0	SEPTEMBER 10, 2015	
Signature of Regions If signing on behalf of an en		Date	
Typed or Printed I	(eme		
	* * * FILIN	G FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO PLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, PL 32314
CR2E045 (03/12)

(((H15000218170 3)))