

PD4000084462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

RA/RO/CHG  
① 9.19.04



400078672254

09/15/06--01014--019 \*\*35.00

FILED  
SECRETARY OF STATE  
06 SEP 15 AM 8:08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LTS MANAGEMENT CORPORATION  
(Name of Corporation)

**DOCUMENT NUMBER:** PD4000084462

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:

MICHAEL J. FINGAR, ESQ.  
(Name of Contact Person)

MICHAEL J. FINGAR, P.A.  
(Firm/Company)

P.O. Box 812395  
(Address)

BOCA RATON, FL 33481-2395  
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL J. FINGAR at 561 789-4970  
(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: LTS MANAGEMENT CORPORATION
2. The principal office address: 822 BRYAN PLACE  
FORT LAUDERDALE FL 33312
3. The mailing address (if different): -
4. Date of incorporation/qualification: 5/27/04 Document number: 104000084462
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

LISA SEEGL  
822 BRYAN PLACE  
FORT LAUDERDALE, FL 33312

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

JEFFREY TEW  
TEW CARDENES  
1441 <sup>(PO Box NOT acceptable)</sup> BRICKELL AVENUE - 15TH FLOOR  
MIAMI, FL 33131

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.

Rina Siegel  
(Signature of an officer or director)

Lisa Siegel  
(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.

(Signature of Registered Agent)

9/6/6  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)

FILED  
SECRETARY OF STATE  
06 SEP 15 AM 8:08