

P15000084709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

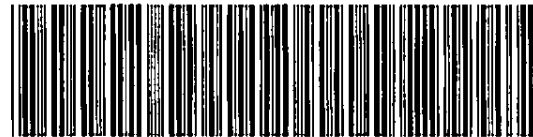
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AUG 14 2017
S. YOUNG

FILED
17 AUG 11 10 46 35
California Secretary of State



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 26, 2017

BRYAN GROSMAN
TROPICANA INVESTORS INC
315 NORTH FEDERAL HIGHWAY
HOLLYWOOD, FL 33020

SUBJECT: TROPICANA INVESTORS, INC.
Ref. Number: P15000084709

We have received your document for TROPICANA INVESTORS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

~~A business entity may not serve as its own registered agent.~~ Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 117A00015047

RECEIVED
2017 AUG 11 AM 10:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

See
Attached
Revision

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tropicana Investors Inc

Name of Corporation

DOCUMENT NUMBER: P15000084709

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:

Bryan Grosman

Name of Contact Person

Tropicana Investors Inc

Firm/Company

315 North Federal Highway

Address

Hollywood, Florida 33020

City/State and Zip Code

ev@brycorholdings.com

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

For further information concerning this matter, please call:

Bryan Grosman

Name of Contact Person

at (954) 458-2826

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: Tropicana Investors Inc.
2. The principal office address: 4200 Sheridan Street, Hollywood, Florida 33021
3. The mailing address (if different): 4200 Sheridan Street, Hollywood, Florida 33021
4. Date of incorporation/qualification: 10/14/15 Document number: P15000084709
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)

Grosman, Bryan Esq

1051 NW 3rd Street

Hallandale, Florida 33009

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

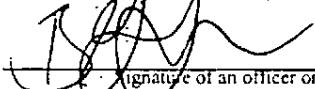
Hollywood RA Services LLC
4200 Sheridan Street

P.O. Box NOT acceptable

Hollywood, Florida 33021

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.

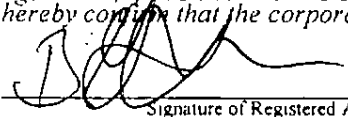


Signature of an officer or director

Bryan Grosman

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 certify that the corporation has been notified in writing of this change.



Signature of Registered Agent

7/11/17

Date

If signing on behalf of an entity:

BRYAN GROSMAN

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