

P16000042609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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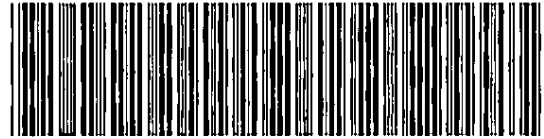
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 14, 2019

MICHAEL BENENSON  
BENENSON & ASSOCIATES, INC.  
350 S. OCEAN BLVD 3A  
BOCA RATON, FL 33432

SUBJECT: BENENSON & ASSOCIATES, INC.  
Ref. Number: P16000042609

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

FOR ITEM #6, A NEW REGISTERED AGENT MUST BE SELECTED. PLEASE RESUBMIT.

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.

Susan Tallent  
Regulatory Specialist II

Letter Number: 919A00023407

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 29, 2019

MICHAEL BENENSON  
BENENSON & ASSOCIATES, INC.  
350 S OCEAN BLVD.  
BOCA RATON, FL 33432

SUBJECT: BENENSON & ASSOCIATES, INC.  
Ref. Number: P16000042609

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA LIMITED LIABILITY COMPANY, but your entity is a FLORIDA PROFIT CORPORATION. Please complete and return the enclosed blank form(s). THERE IS AN ADDITIONAL FILING FEE OF \$10.00 STILL DUE.

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.

Susan Tallent  
Regulatory Specialist II

Letter Number: 319A00022241

2019 Nov 12 PM 2:11

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: BENENSON & ASSOCIATES, INC  
Name of Corporation

DOCUMENT NUMBER: P16000042609

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 BENENSON  
Name of Contact Person

BENENSON & ASSOCIATES, INC  
Firm/Company

350 S. OCEAN BLVD  
Address

BOCA RATON FL 33432  
City/State and Zip Code

MTBENENSON@BAICONSULTING.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL BENENSON at ( 917 ) 328-8222  
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: BENENSON & ASSOCIATES, INC.
2. The principal office address: 350 S. OCEAN BLVD  
BOCA RATON, FL 33432
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 5/11/2016 Document number: P16000042609
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)

RESIGNED  
PAUL LANE ESQ P.A.  
7880 N. UNIVERSITY DR, TAMARAC, FL 33321

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

MICHAEL BENENSON  
350 S. OCEAN BLVD  
BOCA RATON, FL 33432

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA

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.

Michael Benenson  
Signature of an officer or director

MICHAEL BENENSON PRESIDENT  
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.

Michael Benenson  
Signature of Registered Agent

11/6/19  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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