

PIL000067543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

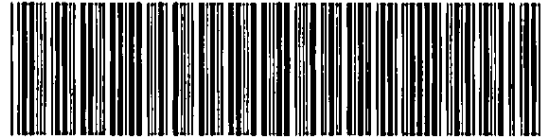
(Business Entity Name)

(Document Number)

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THE BELLEH

Law Group, PLLC

Iberia Bank Financial Center
150 S. Pine Island Road, Suite 300
Plantation, Florida 33324
www.bellehlaw.com

Owei Z. Belleh, Esq.
email: owei@bellehlaw.com

October 20, 2020

Via U.S. Mail
Edify Financial Consulting Group
11102 Alameda Bay Court
Wellington, FL 33414

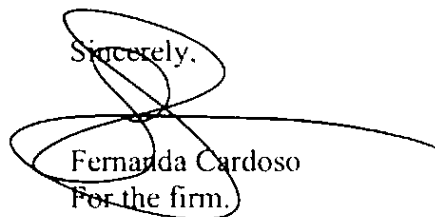
Re: State of Change of Registered Office

Enclosed please find the Statement of Change of Registered Office which must be submitted to the State.

We have also included a check in the amount of \$25.00, and a stamped envelope for you to mail after you sign where marked in red.

Should you have any questions or concerns please feel free to contact our office at the above-referenced telephone number and e-mail.

Sincerely,



Fernanda Cardoso
For the firm.

Enclosures (1)
FC/OZB

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Edify Financial Consulting Group

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Owei Z. Belleh, Esq.

Name of Person

Belleh Law Group, PLLC

Firm/Company

150 S Pine Island Road, Suite 300

Address

Plantation, FL 33324

City/State and Zip Code

Owei@BellehLaw.com

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

For further information concerning this matter, please call:

Owei Z. Belleh, Esq.

305

300-8277

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Edify Financial Consulting Group

2. (a) Principal Address (b) Mailing Address

Principal office address of limited liability company:
(*Note: MUST BE STREET ADDRESS*)

Mailing address of limited liability company:
(*Note: MAY BE POST OFFICE BOX*)

1000 Corporate Dr 700

11102 Alameda Bay Court

Ft Lauderdale, FL 33334

Wellington, FL 33414

08/15/2016

P16000067543

3. Date of filing/registration in Florida

4. Document number

5. (a) Owei Z. Belleh, Esq.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2525 Embassy Drive, Suite 2

Cooper City, FL 33026

(b) Owei Z. Belleh, Esq.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

Belleh Law Group, PLLC

NEW Registered Office Address:

150 S Pine Island Road, Suite 300

Plantation, FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

GIL FERNANDEZ
Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

**Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00**