## P18000044450

(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(essential)
Codificat Contract Contract Contract
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>





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JUL 19
S. PRATHER

## **COVER LETTER**

**TO:** Amendment Section

SUBJECT: ZINA AND MARK HOFKIN, INC		
Name of Corporation		
DOCUMENT NUMBER: P18000044450		
The enclosed Statement of Change of Registered	Office/Agent and fo	e are submitted for filing.
Please return all correspondence concerning this	matter to the following	ng:
MICHELLE SILVERMAN		
Name of Contact Person		
Firm/Company	<u> </u>	
17813 FIELDBROOK CIR W		
Address .		
BOCA RATON, FL 33496		
City/State and Zip Code		
MICHELLE.H.SILVERMAN	=	
E-mail address: (to be used for future annual	report notification	)
For further information concerning this matter, p	olease call:	
MICHELLE SILVERMAN	at ( <sup>561</sup>	)901-2501 ode & Daytime Telephone Num
Name of Contact Person	Arca Co	ode & Daytime Telephone Num

Mailing Address: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

## **Street Address:**

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

٢.

CR2E045 (04/13)

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

statement of che	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida nange is submitted for a corporation organized under the laws of the State o	f <u>FLORII</u>	DA	
	ler to change its registered office or registered agent, or both, in the State of	f Florida.		
1. The name of	f the corporation: ZINA AND MARK HOFKIN, INC.			
2. The principal	al office address: 3211 S OCEAN UNIT 601, HIGHLAND BEACH, FL 33487			<del>_</del>
3 The mailing:	address (if different): 17813 FIELDBROOK CIRCLE W. BOCA RATON, FL	. 33496		
4. Date of incor	rporation/qualification: 5/14/2018 Document number: P18000	044450		
5. The name an	nd street address of the current registered agent and registered office on file artment of State: (If resigned, enter resigned)			
	MICHELLE HOFKIN			282
	2530 NW 70TH BLVD		:	61 Min 1888
	BOCA RATON, FL 33496	<u></u>	(	
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered of	office		hii 7: 5
	MICHELLE SILVERMAN		~	ىت
	17813 FIELDBROOK CIR, W			
	P.O. Box NOT acceptable	_		
	BOCA RATON, FL 33496			
The street addr as changed wil	ress of its registered office and the street address of the business office of ll be identical.	its regis	tered as	gent,
Such change w authorized by t	vas authorized by resolution duly adopted by its board of directors or by a the board, or the corporation has been notified in writing of the change.	ın officei	r so	
(/2)	ZINA HOFKIN AS PRESIDEN	Т		
Signati	fure of an officer or director Printed or typed name and	J title		
I further agree of my duties, a document is be	of the appointment as registered agent and agree to act in this capacity, by to comply with the provisions of all statutes relative to the proper and cound I am familiar with and accept the obligation of my position as registed eing filed merely to reflect a change in the registered office address, I here as been notified in writing of this change.	omplete p red agen reby conj	perform t. Or i firm tha	iance f this it the
	ignature of Registered Agent Date	<del></del>		
	pehalf 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 (04/13)