

P19 0000 16337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SHARE AMERICA, INC.  
Name of Corporation

**DOCUMENT NUMBER:** P19000016337

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:

LESLIE LINEVSKY

Name of Contact Person

SHARE AMERICA, INC.

Firm/Company

6303 BLUE LAGOON DR STE 400

Address

MIAMI FL 33126-6040

City/State and Zip Code

LESLIE.LINEVSKY@SHAREAMERICA.COM

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

For further information concerning this matter, please call:

LESLIE LINEVSKY

Name of Contact Person

at ( 954 ) 649-1432

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

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DIVISION OF CORPORATIONS

**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: SHARE AMERICA, INC.
2. The principal office address: 6303 BLUE LAGOON DR STE 400  
MIAMI FL 33126-6040
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/15/2019 Document number: P19000016337
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)  
LESLIE LINEVSKY  
2735 HACKNEY RD  
WESTON, FL 33331

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

LESLIE LINEVSKY  
6303 BLUE LAGOON DR STE 400  
P.O. Box NOT acceptable  
MIAMI FL 33126-6040

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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]  
Signature of an officer or director

Richard Linersky  
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]  
Signature of Registered Agent

10/04/19  
Date

If signing on behalf of an entity:

LESLIE LINEVSKY  
Typed or Printed Name

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