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(Business Entity Name)	
(Document Number)	
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TALLENT SEP 1 0 2323



August 21, 2020

ROBERT G. BREIER BREIER AND SEIF, PLLC 18851 NE 29TH AVENUE, SUITE 405 AVENTURA, FL 33180

SUBJECT: LINCHESTER REALTY CORPORATION

Ref. Number: P98000043475

We have received your document and check(s) totaling \$315.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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.

Letter Number: 520A00016024

Susan Tallent Regulatory Specialist II

Rec. allino

## BREIER and SEIF, PLLC

18851 NE 29" AVENUE, SUITE 405 AVENTURA, FLORIDA 33180 PHONE 305-935-0507 • FAX 305-935-0608

ROBERT G. BREIER EVAN D. SEIF

June 29, 2020

Amendment/Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 332301

Re: Registered Agent - Change of Address

Dear Sir or Madam:

Enclosed are various entities that require a change of address for the registered agent.

Also enclosed is our payment. Please process this request at your convenience.

If you have any questions, please feel free to call me at (305) 935-0507.

Sincerely,

MARIA L. WILLIAMSON

Legal Assistant

/mlw

Enclosures

KARGB-EDS/Mise-2019/Amendment Sect-Div of Colp-RA-Change of Address lit dock

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Linchester Realty Corporation
Name of Corporation
DOCUMENT NUMBER: P98000043475
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:
Robert G. Breier
Name of Contact Person
Breier and Seif, PLLC
Firm/Company
18851 N.E. 29th Avenue, Suite 405
Address
Aventura, FL 33180
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Maria L. Williamson  Name of Contact Person  Name of Contact Person  Area Code & Daytime Telephone Number
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  Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32301

Clifton Building 2661 Executive Center Circle

CR2E045 (03/12)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Linchester Realty Corporation
2. The principal	office address: 2800 Ponce De Leon Blvd., # 1125
	Coral Gables, FL 33134
3. The mailing a	address (if different): 2801 N.E. 208th Terr, Suite 102
	Aventura, FL 33180
4. Date of incor	poration/qualification: 05/13/1998 Document number: P98000043475
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Breier, Robert G
	2800 Ponce De Leon Blvd., # 1125
	Coral Gables, FL 33134
6. The name and (if changed):	Coral Gables, FL 33134  d street address of the new registered agent (if changed) and /or registered office
	Robert G. Breier
	بن 18851 NE 29th Avenue, Suite 405
	P.O. Box NOT acceptable  Aventura, FL 33180
The street addr	ess of its registered office and the street address of the business office of its registered agent. I be identical.
Such change w -authorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
KU D	ure of an officer or director  Printed of typed name and title
I hereby accept I further agree performance of	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered sis document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
大九	15rec 9/1/2020
•	gnature of Registered Agent Date Chalf of an entity:
Robert G. I	·
	Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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