

P98000063793

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 29 2017

S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CITRIN FINANCIAL AND INSURANCE, INC.
Name of Corporation

DOCUMENT NUMBER: P98000063793

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:

BART H. CHEPENIK, ESQ.

Name of Contact Person

CHEPENIK TRUSHIN LLP

Firm/Company

12550 BISCAYNE BLVD., SUITE 805

Address

NORTH MIAMI, FL 33181

City/State and Zip Code

BCHEPENIK@CTLLP.COM

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

For further information concerning this matter, please call:

BART H. CHEPENIK

Name of Contact Person

at (**305**) **981-8889**

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: CITRIN FINANCIAL AND INSURANCE, INC.
2. The principal office address: 300 71ST STREET, SUITE 300, MIAMI BEACH, FL 33141
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/21/1998 Document number: P98000063793

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)

RICHARD I. BLINDERMAN

106 EAST COLLEGE AVENUE, SUITE 720

TALLAHASSEE, FL 32301

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

BART H. CHEPENIK, ESQ., CHEPENIK TRUSHIN LLP

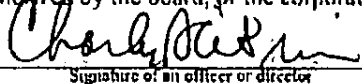
12550 BISCAYNE BLVD., SUITE 805

P.O. Box NOT acceptable

NORTH MIAMI, FL 33181

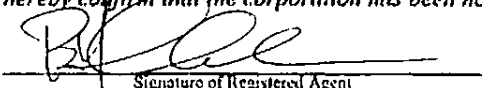
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director

CHARLES A. CITRIN, DIRECTOR
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 of Registered Agent

9/22/17
Date

If signing on behalf 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 (03/12)

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