8/24/2018



Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone : (855)330-1010 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE DAN TRADING LLC

Certificate of Status	0
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AUG 27 2018

EXAMINER

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Help

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.

I. N	ame of the limited liability company: DAN Trading	LLC	u		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	05/01/2018	L180	000109946		
3.	Date of filing/registration in Florida	4.	Document number		
-	Registered Agents Inc.				
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florida Dept.	of State:		
	Registered Office Address (MUST BE FLORIDA STREET 30 NORTH GOLUD STE 150A	TADDRESS)	·	23 23 33	
	SHERIDAN	82801	- ,	# AU6 24	
(b)	Registered Agents Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>			24 AH 9:	
	NEW Registered Office Address:		<i>ž.</i>	18	
	3030 N. Rocky Point Dr. STE 150A				
	Tampa	FL 33607			
the cl	limited liability company is not organized under the hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member rticles of organization or the operating agreement of the street of the member of the street of the member of the street o	of the registere lliability compa is of the limited he limited liabil	any, it is hereby confirmed that the liability company or as otherwise.	of the registered he change(s) se provided in	
Sig	Signature of a member or authorized representative of a member		Printed or typed name of signee		
provi the o	reby accept the appointment as registered agent and a isions of all statutes relative to the proper and complebilizations of my position as registered agent as provierely reflect a change in the registered office address. The writing of this change.	ngree to act in t. ete performance ided for in Chap . I hereby confir	his capacity. I further agree to be of my duties, and I am familiar oter 605, F.S. Or, if this document that the limited liability comp	comply with the with and accep ent is being filed cany has been	
Sign	ature of Registered Agent				