120000159305

(Re	questor's Name)					
(Address)						
(Address)						
(Cit	y/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Bu:	siness Entity Nai	me)				
(Do	cument Number)	1				
Certified Copies	_ Certificate	s of Status				
Special Instructions to	Filing Officer:					
J. HORNE						
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		5/13				

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations SEGMENT TALLAHAGGEE, FL

April 6, 2022

JOURDAN CERRILLO 5716 CORSA AVE SUITE 110 WESTLAKE VILLAGE, CA 91362 US

SUBJECT: DESIGNSYS LLC Ref. Number: L20000159305

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging.

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.

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

Letter Number: 922A00008026



5716 Corsa Ave Suite 110 Westlake Village, CA 91362

Phone: (818) 264-4266 Toll-Free: (888) 366-9552 Fax: (877) 366-9552 www.DoMyLLC.com

May 9, 2022

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Florida Secretary of State,

Enclosed please find the Revised agent change and regection notice for for Designsys LLC.

Please return the documents once the filing is completed to:

DoMyLLC.com, LLC Attn: Processing 5716 Corsa Ave. Suite 110 Westlake Village, CA 91362

If you have any questions, please contact our office at (888)-366-9552.

Sincerely,

Processing Processing@domyllc.com www.DoMyLLC.com

COVER LETTER

TO:	Registration Section Division of Corporations				
CIID I	ECT:				
SUBJ					
Dear S	ir or Madam:				
The er	closed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning	g this matter to the following:			
	Jourdan Cerrillo				
	Name of Person				
	DoMyLLC.com, LLC				
	Firm/Company				
	5716 Corsa Ave. · Suite	: 110			
	Address				
	Westlake Village, CA 9136	52-7354			
	City/State and Zip Coc	de .			
	processing@domyllc.co				
F	-mail address: (to be used for future	annual report notification)			
For fu	rther information concerning this mat	ter, please call:			
Steve	n Pickett	888-366-9552			
	Name of Person	Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the follow	ing amount:			
	☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)

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.

1.	Na	me of the limited liability company: DESIGNSYS L	LC		
2.	(a)	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)
		1725 Scotch Pine Drive	_		
		Brandon, FL 33511	_		
		06/10/2020		L2000015	59305
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Odunfa-Jones, Adeleye O			
٥.	(ω)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1725 Scotch Pine Drive			
		Registered Office Address (MUST BE FLORIDA STREET A	<u>iddk</u>	<u>E33)</u>	T 2
		Brandon		33511	Z022 HAY SECRETA
	(b)	InCorp Services, Inc.			SSE SSE
(c	(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:		
		17888 67th Court North			AM II: 36
		NEW Registered Office Address:			•
					_
		Loxahatchee, FL_		33470	_
the ag wa	ent v is/wo	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the r ibility f the	egistered offic v company, it limited liabili	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
~7	4-0	War and the same of the same o		Adeleye O O	
		arure of a member authorized representative of a member			Printed or typed name of signee
pre the to	ovisi 2 obl merc	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h d in writing of this change.	ee to perfo l for wereb	act in this cap ormance of my in Chapter 60 y confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
	•	Isabel Burgos on behave of Registered Agent	alf o	f InCorp Se	rvices, Inc.