

L23000187030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

08109123

Office Use Only



400408953574

S. CHATHAM 05/18/23--01022--013 **35.00
AUG 25 2023

2023 AUG -9 AM 11:17
08109123



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 21, 2023

RANDY LARKOWSKI
2687 ST. JOSEPH'S DR. E
DUNDIN, FL 34698 US

SUBJECT: DOCKSIDE VILLAS LLC
Ref. Number: L23000187030

We have received your document for and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham
Regulatory Specialist III
Director's Office

Letter Number: 923A00016331

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dockside Villas LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Randy Larkowski
Name of Person

Dockside Villas LLC
Firm/Company

5323 S. Russell St
Address

Tampa FL 33611
City/State and Zip Code

DocksideVillasLLC@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Randy Larkowski at (813) 857-5611
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 following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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. Name of the limited liability company: Dockside Villas, LLC

2. (a) Dockside Villas LLC (b) Dockside Villas LLC

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

2687 St. Josephs Dr. E.
Dunedin, FL 34698

5323 S. Russell St
Tampa FL 33611

3. 04/17/2023
Date of filing/registration in Florida

4. L23000187030
Document number

5. (a) United States Corporation Agents, Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

476 Riverside Ave
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Jacksonville, FL 32202

(b) Randy Larkowski
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

5323 S. Russell St
NEW Registered Office Address:

Tampa, FL 33611

2023 APR -9 AM 11:17
L23000187030

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

R. Larkowski
Signature of a member or authorized representative of a member

Randy Larkowski
Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

R. Larkowski
Signature of Registered Agent