

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 : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.
Account Number : 073222003555
Phone : (561)686-3307
Fax Number : (561)290-1590

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

Email Address: bmarr@nasonyeager.com

**REGISTERED AGENT CHANGE
DORAN FAMILY FIRST, LTD.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Doran Family First LTD

Name of Limited Partnership or Limited Liability Limited Partnership

2. 4/18/11

Date of filing/registration in Florida

3. A11000000308

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Nason, Nathan

Name

3001 PGA Blvd., Suite 305

Address

Palm Beach Gardens, FL 33410

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Armour, Alan

Name

3001 PGA Blvd., Suite 305

Florida street address (P.O. Box not acceptable)

Palm Beach Gardens FL 33410

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]
Signature of General Partner

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.

[Signature]
Signature of Registered Agent

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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