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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DOILARD ENTAIPTISES 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:		
RObert L. Dollard IV Name of Person		
DOILARD Enterprises LLC Firm/Company		
1475 KETTIECINUM TYCIII Address		
Enterprise Fu 32725 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
ROBERT L DOLLARD at (407) 300 7498 Name of Person Area Code & Daytime Telephone Number		
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303		
Enclosed is a check for the following amount:		

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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. Name of the limited liability company: 2. (a) 1475 Kettledrum Trail Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) ENTER DYSE, FA 32725 ENTER	SKLHICHUM TRU Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) PUSC FL 32725
Date of filing/registration in Florida 5. (a) ROBERT L. DOLLARDIL	000000478
Registered Agent and Registered Office shown on the records of the Florida Dept. of State 2 14 Veritors Drive Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	202 (
OVIEDO, FL 327 LOS , FL (b) Robert L Dollard II Enter name of NEW Registered Agent and/or NEW Registered Office address:	FILED AUG 28 PH 2: 11 CRETARY OF STATE ALLAHASSEE, FL
NEW Registered Office Address: 1475 Kettledrum Trail Enterprise FL32725	
If the limited liability company is not organized under the laws of the State of Flo change or changes are made, the Florida street address of the registered office and agent will be identical. Or, in the case of a Florida limited liability company, it is was/were authorized by an affirmative vote of the members of the limited liability the articles of organization or the operating agreement of the limited liability com	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signature of a member or authorized representative of a member I hereby accept the appointment as registered agent and agree to act in this capa provisions of all statutes relative to the proper and complete performance of my define the obligations of my position as registered agent as provided for in Chapter 605, to merely reflect a change in the registered office address, I hereby confirm that the notified in friting of this change.	Printed or typed name of signee city I further agree to comply with the

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00