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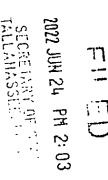
(Requestor's Name)					
(Address)					
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
ertified Copies Certificates of Status					
Special Instructions to Filing Officer:					
J. HORNE					
SEP 2 0 2022					

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06/24/22--01025--013 **25.00



COVER LETTER

TO: Registration Section Division of Corporations	•
DOREEMAL, LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
KIRK VON STEIN	
Name of Person	
DOREEMAL, LLC	
Firm/Company	
626 OLD DIXIE HIGHWAY SW	
Address	
VERO BEACH, FL 32962	
City/State and Zip Code	
kirk@vscre.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, please	e call:
KIRK VON STEINat (772 778-4885
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 amou	ınt:
■ \$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.

l. N	ame of the limited liability company: DOREEMAL, L	I.C			
2. (a)	626 OLD DIXIE HIGHWAY SW	(b)	(b) 626 OLD DIXIE HIGHWAY SW		
(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			_	mited liability company: POST OFFICE BOX)
	626 OLD DIXIE HIGHWAY SW	1	626 OLD 1	DIXIE HIGHWAY	· SW
	VERO BEACH, F1, 32962		VERO BE	ACH. F1. 32962	-
	05/28/2003		030000191	199	
3.	Date of filing/registration in Florida	4.		Document numb	per
5 ()	DOREE FROMBERG				
5. (a)	Registered Agent and Registered Office shown on the records o TWO GROVE ISLE DR.	f the Florida I	Dept. of Stat	- e:	2022 SE TAL
	Registered Office Address	<u> ADDRESS)</u>		_	FINESECRETARISES
	COCONUT GROVE F	33133 L		_	新星 T
(b)	KIRK VON STEIN			_	1 2: 04
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office addr	<u>(ess</u> :	_	F
	626 OLD DIXIE HIGHWAY SW				
	NEW Registered Office Address:			_	
	VERO BEACH	32962		-	
	, г	L		_	
change agent v was/w	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative pote of the members icles of organization or the operating agreement of the	e registered iability com of the limited lia	office and pany, it is ed liability	d the business off s hereby confirme y company or as ipany.	fice of the registered ed that the change(s)
Signa	iture of a member or authorized representative of a member			Printed or typed na	me of signee
provis the ob to mer	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I d in writing of this change.	ree to act in e performan ed for in Ch hereby con	this cape we of my c apter 605 firm that	acity. I further a duties, and I am f , F.S. Or, if this the limited liabili	gree to comply with the amiliar with and accept document is being filed ty company has been
Signati	ire of Registered Agent				