

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6380

Account Name : GOLDBERG BATES, PLLC

Account Number : I20070000134

Phone: : (407)893-3776

Fax Number

: (407)893-3779

REGISTERED AGENT CHANGE

DALTON ST. PETE BEACH, LLC

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Dalton St. Pete Beach, LLC	<u>.</u>
	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:
• •	
Jodi Jaiman	
(Name of Person)	08 / TAL
	APR LLAH
Soone Business Development, Inc.	——————————————————————————————————————
(Firm/Company)	. <u>111</u> -<
	<u>"</u> ନ 🚡
3660 Maguire Blvd., Suite 103	
(Address)	
	> —
Orlando, FL 32803	
(City/State and Zip Code)	
For further information concerning this matter	ter, please call:
Rachel Farber	_at(407) 893-3776
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following	ng amount:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
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INH\$18 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned liability company submits the following statement in order to change its registered office or regagent, or both, in the State of Florida.	limited sistered	
1. The name of the limited liability company is: Dalton Clearwater, LLC		
2. The mailing address of the limited liability company is : 2875 S. Orange Ave., Sulte 500	<u> </u>	
Orlando, FL 32806		
4/8/08 L04000030011		
3. Date of filing/registration in Florida 4. Document number		
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:		
Corporate Creations Network, Inc.	08 APR	
Name	岩	
11380 Prosperity Farms Rd. #221E 全治	\tilde{z}	
Address	8	
Paim Beach Gardens, FL 33410		
City, State and Zip	? 圣	
6. The name and address of the new registered agent and/or office:	era -	
Bates Mokwa, PLLC	ri	
Name 3660 Maguire Blvd., Suite 102		
Florida street address (P.O. Box NOT acceptable)		
Orlando FL 32803		
City, State and Zip		
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 of 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 of the members of the limited liability company or as otherwise provided in the articles of organized the operating agreement of the limited liability company.	l vote	
(Signature of a member or authorized representative of a member)		
Jodi Jaiman		
(Printed or typed name of signee)		
I hereby accept the appointment as registered agent and agree to act in this capacity. I further as comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent as provided for Chapter 408, F. 8. Or, if this document is being filed to merely reflect a change in the registered of address, I hereby confirm that the limited liability company has been notified in writing of this charge.	ree to uties, or in ffice inge.	
(Signature of Registered Agent)		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

FILING FEE: \$25.00

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