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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	Vina Del Mar Thoroughbred	s, LLC	
30 D 0		e of Limited I	Liability Company
Dear S	Sir or Madam:		
The ci	nclosed Registered Agent/Registered Offi	ice Change and	d fee(s) are submitted for filing.
Please	return all correspondence concerning the	is matter to the	e following:
Richa	ard Q. Boylan		
	Name of Person		
Vina	Del Mar Thoroughbreds, LLC		
	Firm/Company		
100 1	1st Ave N Unit 3601		
	Address		
St Pe	etersburg, FL 33701		
	City/State and Zip Code		
RQB	oylan@yahoo.com		
Ī	E-mail address: (to be used for future ann	ual report noti	fication)
For fu	rther information concerning this matter.	please call:	
Richa	ard Q. Boylan	202 at (253-9647
	Name of Person	(Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R D P.	IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314
	Enclosed is a check for the following	amount:	
	■ \$25 Filing Fee	- 9	355 Filing Fee & Certified Copy

TO:

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

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability comsubmits the following statement in order to change its registered office or registered agent, or both, in the Stat-Florida.

2. (a)	100 1st Ave N Unit 3601		100 101	Ava Ni I Init Oc		
,		(b		100 1st Ave N Unit 3601		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		· —	•	mited liability company: POST_OFFICE_BOX)	
	St Petersburg, FL 33701		St Peter	rsburg, FL 337	' 01	
						
	01/04/2005		L050000	01143		
3.	Date of filing/registration in Florida	4.		Document num	ber	
5. (a)	Richard Q. Boylan					
()	Registered Agent and Registered Office shown on the records	of the Florid	a Dept. of Stat	 te:		
	316 13th Ave N					
	Registered Office Address	TADDRES.	5)	_	~ 1	
	St Petersburg	FL 33701		_		
	·	FL.		-	•	
(b)						
(0)	Enter name of NEW Registered Agent and/or NEW Register	red Office ac	ldress:		ī 	
	100 1st Ave N Unit 3601			_	c.	
	NEW Registered Office Address:					
	St Petersburg	33701		_		
	·	FL_33701		_		
the changent was/x	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited reauthorized by an affirmative vote of the member cles of organization or the operating agreement of th	of the regi l liability c rs of the lir he limited	stered offic ompany, it i nited liabilit liability cor	te and the busines is hereby confirm ty company or as mpany.	ss office of the regis- ned that the change(s	
[R	frant Whoyau	Ric	hard Q. E			
	the of a member or anti-fired representative of a member by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple ignitions of my position as registered agent as provi illy reflect a change in the registered office address, i invitating of this change	agree to ac ite perforn ided for in I hereby c	t in this cap ance of my Chapter 60, confirm that	Printed or typed modelity. I further of duties, and I am 5, F.S. Or, if this the limited liabi	•	

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