## 105000029851

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Susmoss Entry Nume)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



200343898562

04/38/20--01006--020 \*\*25.06

2020 //Fix 30 PH 1: 16

RA/RO/Ch.

MAY 1 4 2020 I ALBRITTON

## **COVER LETTER**

	Registration Section Division of Corporations	-			
SUBJEC	CT: DGV En	18110	23218	ÜLC	
	Name of Lim	ited Lia	bility Compa	ny	
Dear Sir	or Madam:				er,
The encle	osed Registered Agent/Registered Office Chang	ge and fo	ec(s) are subn	nitted for filin	g.
Please re	turn all correspondence concerning this matter	to the fo	llowing:		
	DAVIO DOLE  Name of Person	· ·	_		
	POU Enterprises LLC Firm/Company		_		
	1507 The OAKS DIVE Address	<u> </u>	_		
<del> </del>	Maitland FL 3975/ City/State and Zip Code		_		
E-n	DDD TJA @ AOL . COM	t notifica	_ ation)		
For furth	er information concerning this matter, please ca	all:			
	Davio DORE at (	<u>407</u>	) <u>432</u> Area Code &	- <i>0080</i> E Daytime Te	lephone Number
F I F	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314		The Centre 2415 N. M		see
I	Enclosed is a check for the following amount:	:			
)	\$25 Filing Fee	□ \$55	Filing Fcc &	Certified Co	py
INHS18 (	2/14)				

## LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability comp submits the following statement in order to change its registered office or registered agent, or both, in the State of Flor

l.	Na	me of the limited liability company:	DGU	Enterprises.	LLC		
2. (	(a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
		1507 The Days Drive		1507 The	OAKS Drive		
		Mailland, Fl 3751		Martland,	FL 3275/		
3.		Date of filing/registration in Florida	4.	Document nun	nber		
5.	(a)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:			
		Registered Office Address (MUST BE FLORIDA STREET			. 2		
		141 WAlkers Pointe			2020 COR		
		AUBUINDAH FI		<del>23</del>	ن الله الله الله الله الله الله الله الل		
(	(b)	DAVID DORE			0		
•	,	Enter name of NEW Registered Agent and/or NEW Registered	l Office address:	<del></del>	E C		
		GOOD DIVID DOE	9		PH 1:16		
		NEW Registered Office Address:	· <u> </u>	<del></del>			
		1507 The DAKS T	Dive				
		Mailland, FI	327	5/			
cha age was	nge nt w s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered off ability compar of the limited l	ice and the business only, it is hereby confirmability company or a	office of the registered med that the change(s)		
				Brenon Printed or typed	Giles		
	-	ure of a member or authorized representative of a member	_				
nou	јіва <u>/ /</u> .	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. It in writing of this change.	ree to act in th performance o d for in Chapt hereby confirn	is capacity. I further of my duties, and I am er 605, F.S. Or, if thi n that the limited liabi	agree to comply with t. I familiar with and acc Is document is being fil- lity company has been		
SIR	will	re of Registered Agent					