

LD6000047427

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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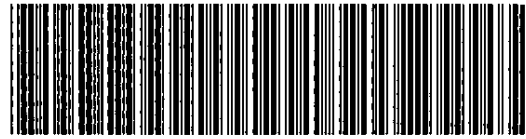
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

SEP 16 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DGS Farm, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L06000047427

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jewell Jones
Name of Person

DGS Farm, LLC
Name of Firm/Company

103 Costa Mesa
Address

The Villages, FL 32159
City/State and Zip Code

jewell5951@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jewell Jones at (352) 239-5951
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 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: DGS Farm, LLC

2. (a) Principal office address of limited liability company: _____



(Note: **MUST BE STREET ADDRESS**)

103 Costa Mesa
The Villages, FL 32159

(b) Mailing address of limited liability company: _____



(Note: **MAY BE POST OFFICE BOX**)

103 Costa Mesa
The Villages, FL 32159

3. Date of filing/registration in Florida _____

4. Document number 106000047427

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: _____

Williams, Kathy L.

Registered Office Address: _____

916 Guernsey St
Orlando, FL 32804

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: _____

Jewell Jones

NEW Registered Office Address:
(**MUST BE FLORIDA STREET ADDRESS**)

103 Costa Mesa
The Villages, FL 32159
0, FL _____

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 office 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 vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Jewell Jones
Signature of a member or authorized representative of a member

Jewell Jones
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Jewell Jones
Signature of Registered Agent

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

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SEP 15 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA