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B. BOSTICK NOV - 7 2013 EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Dave Manning E	nterprise	es LLC	
	imited Liabilit	y Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered O	office Change a	nd fee(s) are submitted	for filing.
Please return all correspondence concerning	this matter to th	he following:	
David L Manning			
Name of Person		-	
Dave Manning Enterpris	es LLC	-	
4311 Crystal Lake Dr # 2	203	_	ZH3 NOV TALLAHI
Address		-	76
Pompano Beach FI 3306	64	_	1886
City/State and Zip Code			الماس المسا
DM355@nova.edu E-mail address: (to be used for future annual report n	otification)	-	
For further information concerning this matter	·		
David L Manning	at (954	254-6389	
Name of Person	A	rea Code & Daytime Telephor	ie Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divis P.O.	Stration Section sion of Corporations Box 6327 shassee, Florida 32314	
Enclosed is a check for the following	ng amount:		
\$25 Filing Fee	□ \$55	Filing Fee & Certified	і Сору

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: Dave Manning En	terprises LLc	
2. (a) Principal office address of limited liability compa	my: 4311 Crystal lake Dr # 203	
(Note: MUST BE STREET ADDRESS)	Pompano Beach Fl 33064	· · · · · · · · · · · · · · · · · · ·
(b) Mailing address of limited liability company:	1503 W Prospect Rd # 128	
(Note: MAY BE POST OFFICE BOX)	Tamarac, FL 33309	
1-9-07	L07000003447	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown o	on the records of the Flori	da Dept. of State:
Registered Agent:	David L Manning	
Registered Office Address:	4747 Hollywood Blvd # 161	
	Hollywood FI 33021	
		\$150 D
(b) Enter name of NEW Registered Agent and/or N	EW Registered Office a	ddress:
NEW Registered Agent:	David L Manning	7 -0
NEW Registered Office Address:	1503 W Prospesct Rd	<u> </u>
(MUST BE FLORIDA STREET ADDRESS)		
	Tamarac	,FL <u>33309</u>
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of entical. Or, in the case of (s) was/were authorized by wise provided in the artic	the registered office a Florida limited by an affirmative vote of
David L Manning Printed or typed name of signee		
,,	d agree to act in this capa proper and complete perf	icity. I further agree to ormance of my duties,
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608 F.S. Or, if this document is being filed to address. Thereby confirm that the limited liability compositions are the confirmations.	position as regīstered ağı merely reflect a change in anv has been notified in w	ent as provided for in 1 the registered office vriting of this change.

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