

LA 1000000 3411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

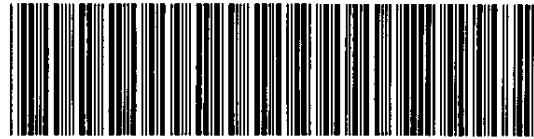
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600290502126

09/27/16--01013--001 **25.00

SEP 27 2016

S. YOUNG

FILED
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
16 SEP 26 PM 5:16

26/6 SEP 26 AM 11:03
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dave Manning Enterprises LLC

Name of 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:

David L Manning

Name of Person

Dave Manning Enterprises LLC

Firm/Company

3907 North Federal Hwy # 271

Address

Pompano Beach, FL 33064

City/State and Zip Code

gr8full12@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Manning

at (954)

254-6389

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 SEP 26 PM 5:16

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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 Enterprises, LLC

2. (a) 43 11 Crystal Lake Dr # 203
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Pompano Beach Fl 33064

(b) 4311 Crystal Lake Dr # 203
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Pompano Beach Fl 33064

3. 01/09/2007
Date of filing/registration in Florida

4. L07000003447
Document number

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
4311 Crystal Lake Dr # 203
Pompano Beach, FL 33064

(b) David L Manning
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
3907 North Federal Hwy # 271
Pompano Beach, FL 33064

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.

David L Manning
Signature of a member or authorized representative of a member

David L. Manning
Printed or typed name of signer

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 605, 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.

David L Manning
Signature of Registered Agent

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

FILED
STATE DEPT. OF FLORIDA
TALLAHASSEE, FLORIDA
16 SEP 26 PM 5:16