LD7000043376

	(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:

L. SELLERS

FEB 2 5 2009

EXAMINER

Office Use Only



600144360206

02/25/09--01038--009 **50.00

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DD & F INDE (Name of L	imited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offic	ee Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
DAULO RIVERA (Name of Person)	·	
CREATIVE DESIGN & FABRICATION (Firm/Company)	~	
1006 KEWEY AVE (Address)		
C) U (F 00 FL 32765 (City/State and Zip Code)		
For further information concerning this matter, p	lease call:	
Name of Person)	(321) 9-16-7223 (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	

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. N	ame of the limited liability company: DO 4	FINDUSTRIES
2. (a	 Principal office address of limited liability compar (<u>Note: MUST BE STREET ADDRESS</u>) 	MIAMI, FLORIDA 33055
(t	o) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	MIAMI, FLURINA 33055
	uate of filing/registration in Florida	<u> </u>
5. (a) Registered Agent and Registered Office shown or	-
-	Registered Agent:	(Flovann', NANCY FLORES
•	Registered Office Address:	4600 N.W. 178 ST MIAMI, FL 33055
(t	o) Enter name of NEW Registered Agent and/or NE	CW Registered Office address:
	NEW Registered Agent:	DAVID RIVERA
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4600 N.W. 178 ST MIANI FLORIDA ,FL 33055
that office here liabi	e limited liability company is not organized under the after the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the by confirmed that the change(s) was/were authorized lity company or as otherwise provided in the articles red liability company.	e laws of the State of Florida, it is hereby confirmed the address of the registered office and the business case of a Florida limited liability company, it is
•	AUD RUGAL ed or typed name of signee)	
i ne com am f F.S. conf	reby accept the appointment as registered agent and ply with the provisions of all statutes relative to the p amiliar with and accept the obligations of my positio Or, if this document is being filed to merely reflect a irm that the limited liability company has been notific	ugree to uct in this capacity. I jurifier agree to roper and complete performance of my duties, and I nay registered agent as provided for in Chapter 608, change in the registered office address, I hereby ed in writing of this change.
_	law pru	09 AL
(Sign	ature of Registéred Agent)	

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