

LD70000063727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

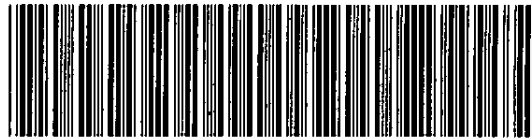
Special Instructions to Filing Officer:

L. SELLERS

AUG - 8 2008

EXAMINER

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08/07/08--01020--007 **25.00

FILED
08 AUG - 7 AM 8:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Design With Joy 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:

Joy Dorst
(Name of Person)

Design With Joy LLC
(Firm/Company)

1045 Sorrento Road
(Address)

Jacksonville, FL 32207
(City/State and Zip Code)

For further information concerning this matter, please call:

Joy Dorst at (904) 647-4511
(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

**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: Design With Joy LLC +

2. (a) Principal office address of limited liability company: 1045 Sorrento Road +
(Note: MUST BE STREET ADDRESS) Jacksonville, FL 32207 +

(b) Mailing address of limited liability company: 1045 Sorrento Road +
(Note: MAY BE POST OFFICE BOX) Jacksonville, FL 32207 +

06/15/2007

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3. Date of filing/registration in Florida

4. Document number

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

Registered Agent: Bob Dahlstrom

Registered Office Address: 1045 Sorrento Road
Jacksonville, FL 32207 +

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

NEW Registered Agent: Joy Dorst +

NEW Registered Office Address: 1045 Sorrento Road
(MUST BE FLORIDA STREET ADDRESS)
Jacksonville, FL 32207 +

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.

Joy Dorst
(Signature of a member or authorized representative of a member)

Joy Dorst
(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.

Joy Dorst
(Signature of Registered Agent)

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

FILED
2008 AUG -7 AM 8:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA