

LU8 000072029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

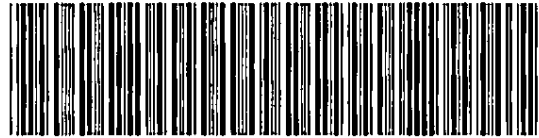
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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O SIMMONS
JAN 14 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VALIANT REALTY GROUP, 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:

LOU FORGES

Name of Person

VALIANT REALTY GROUP, LLC

Firm/Company

1270 DUSTY PINE DRIVE

Address

APOPKA FL 32703

City/State and Zip Code

LFORGES@GMAIL.COM

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

For further information concerning this matter, please call:

LOU FORGES

Name of Person

407 592-7710
at (_____) _____

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 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: VALIANT REALTY GROUP, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

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

112 S BLUFORD AVE.

OCOE, FL 34761

11/24/2020

Mailing address of limited liability company:

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

P.O. BOX 461

OCOE, FL 34761

L08000072029

3. 11/24/2020 Date of filing/registration in Florida 4. L08000072029 Document number

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

VALIANT REALTY GROUP, LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1270 DUSTY PINE DRIVE

APOPKA, FL 32703

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

NEW Registered Office Address:

112 S BLUFORD AVE.

OCOE, FL 34761

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.

[Signature]
Signature of a member or authorized representative of a member

LOU FORGES
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 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.

[Signature]
Signature of Registered Agent

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

FILED
2020 NOV 30 PM 5:59
SECRETARY OF STATE
TALLAHASSEE, FL