

U08 000085730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

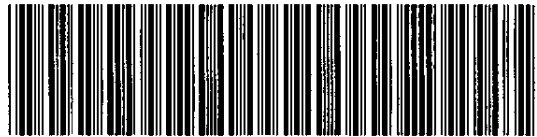
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TALLAHASSEE, FLORIDA

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T. CLINE

APR 10 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 18, 2009

MARIA LEYVA
772 E NORMANDY BLVD
DELTONA, FL 32725

SUBJECT: DM PARTY RENTAL SERVICES LLC
Ref. Number: L08000085730

We have received your document for DM PARTY RENTAL SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 809A0000918

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR -9 PM 3:02

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DM PARTY RENTAL SERVICES 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:

MARIA J LEYVA
(Name of Person)

DM PARTY RENTAL SERVICES LLC
(Firm Company)

772 E NORMANDY BLVD
(Address)

DELTONA, FL 32725
(City State and Zip Code)

For further information concerning this matter, please call:

MARIA J LEYVA at (407) 844-5620
(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: DM PARTY RENTAL SERVICES LLC

2. (a) Principal office address of limited liability company: 3708 PEACE PIPE DR
(Note: **MUST BE STREET ADDRESS**) ORLANDO FL 32829

(b) Mailing address of limited liability company: 3708 PEACE PIPE DR
(Note: **MAY BE POST OFFICE BOX**) ORLANDO FL 32829

SEPTEMBER 09/2008 L08000085730

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: DANIEL DIAZ

Registered Office Address: 3708 PEACE PIPE DR
ORLANDO FL 32829

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

NEW Registered Agent: MARIA J LEYVA

NEW Registered Office Address: 772 E NORMANDY BLVD
(**MUST BE FLORIDA STREET ADDRESS**)

DELTONA FL 32725

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.

Maria J Leyva
(Signature of a member or authorized representative of a member)

Maria J Leyva
(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.

Maria J Leyva
(Signature of Registered Agent)

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