## L090000 11106

(Requestor's Name)
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## COVER LETTER

December 11.C			
SUBJECT: Dasegen LLC	Num v of Limited I	inhility Company	
	Name of Limited I	Jiaointy Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change and	I fee(s) are submitted for f	iling.
Please return all correspondence concerning	g this matter to the	following:	
David A. Sapp			
Name of Person			
David A. Sapp, Attorney at Law, PLLC			
Firm/Company		<del></del>	
2172 West Nine Mile Road #104			
Address			
Pensacola, FL 32534			
City/State and Zip Coo	de		2020 SEC
david@davidsapplaw.com			ZUZD JUL SECRETA
E-mail address: (to be used for future	annual report noti	fication)	AHE - 6
For further information concerning this ma	tter, please call:		
David A. Sapp	850 at (	475-0500 )	
Name of Person		Area Code & Daytime	Telephone Number
Mailing Address:		Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporat	
P.O. Box 6327		The Centre of Tallah	
Tallahassee, FL 32314		2415 N. Monroe Str	
		Tallahassee, FL 323	03
Enclosed is a check for the follow	ving amount:		
■ \$25 Filing Fee	<b>.</b>	\$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)	1967 Meander Circle, Cantonment, FL 32533	(b)	1967 Mea	ander Circle, Cantonment, Fl. 32533
-, .	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2172 West Nine Mile Road #104		2172 Wes	t Nine Road #104
	Pensacola, FL 32534		Pensacola	, FL 32534
	08/11/2009	I.	0900007 <b>7</b>	106
	Date of filing/registration in Florida	4.	<u>-</u> -	Document number
l	David A. Sapp			
a)	Registered Agent and Registered Office shown on the reco	rds of the Florida l	Dept. of Sta	te:
	1967 Meander Circle, Cantonment, FL 32533			
	Registered Office Address (MUST BE FLORIDA STR	(EET ADDRESS)		_
	1967 Meander Circle			
	Cantonment	32533		_
		_, FL		28:
<b>)</b>	David A. Sapp			ZOZO JUL SECRET
"	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regi</u>	stered Office add	ress:	
				ာ မွာ
	David A. Sapp			
	NEW Registered Office Address:			
	2172 West Nine Mile Road #104	<del></del>		_ <del>-                                   </del>
	Pensacola	FL 32534		
ge	imited liability company is not organized under to or changes are made, the Florida street address of	of the registered	l office ar	nd the business office of the registered
l V Wi	vill be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the members.	ted liability con bers of the limi	npany, it i ted liabili	is hereby confirmed that the change(s) to company or as otherwise provided.
гtі	cles of organization or the operating agreement of	of the limited lia	bility cor	mpany.
	A A A A A A A A A A A A A A A A A A A	David	A. Sapp	
	ture of a member of authorized representative of a member			Printed or typed name of signee

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