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SCORELARY OF STATE

OCT 14 2015 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Doug Roberson Name of Lin	DAMANY LLC mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Doug Roberson Name of Person	· · · · · · · · · · · · · · · · · · ·
Doug Roberson) Painting L Firm/Company	LC ES S
4 Misners Teail Address	HASSEE PE
Demond Beach Fl. 32 City/State and Zip Code	1774 1774 1774 1774 1774 1774 1774 1774
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	call:
Name of Person at (386) 3 (2 - 26 6 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 amoun	nt:
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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: Doy Roberson Hainting	LLC
2. (a) 4 MISDERS FAIL DEMOND BEACH (b) 4 MISDERS TE	PAIL Demond Beach
•	f limited liability company: E POST OFFICE BOX)
4 Misners TRAIL 4 Muners	TRAIL
Olmond Beach. Ki. 32174 Demond 3	ench. Fl. 32174
8/13/2009 409000078	3165
3. Date of filing/registration in Florida 4. Document number 1.	mber
5. (a) Doug Roberson	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
224 Pine Cone TRAIL	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
Ormord Beach. Fl	
FI 32/74	i i i i i i i i i i i i i i i i i i i
(b) Doug Roberson 4 Misners TRAIL	
Enter name of NEW Registered Agent and/or NEW Registered Office address:	第 5 E
1/ M and	
Y MISNEKS TAIL NEW Registered Office Address:	15 T 27 27 27 27 27 27 27 27 27 27 27 27 27
	第二 第二
Ormord Beach	
FL 32174	
Tech limited lightlife.	shee and shot after
If the limited liability company is not organized under the laws of the State of Florida, it is here the change or changes are made, the Florida street address of the registered office and the busin	ness office of the registered
agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confined was/were authorized by an affirmative vote of the members of the limited liability company or	
the articles of organization or the operating agreement of the limited liability company.	as otherwise provided in
Chan Rame Doug Rober	501)
Signature of a member or authorized representative of a member Printed or typed	-
I hereby accept the appointment as registered agent and agree to act in this capacity. I further provisions of all statutes relative to the proper and complete performance of my duties, and I at the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if the to merely reflect a change in the registered office address, I hereby confirm that the limited liad notified in writing of this change.	r agree to comply with the m familiar with and accept his document is being filed bility company has been
Signature of Registered Agent	