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### **COVER LETTER**

## TO: Registration Section Division of Corporations

# Vina Del Mar Holdings, LLC SUBJECT:

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:

Richard Q. Boylan

Name of Person

Vina Del Mar Holdings, LLC

Firm/Company

100 1st Ave N Unit 3601

Address

St Petersburg, FL 33701

City/State and Zip Code

RQBoylan@yahoo.com

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

For further information concerning this matter, please call:

Richard Q. Boylan

202

at (

253-9647

Name of Person

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Area Code & Daytime Telephone Number

## 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 I LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability com submits the following statement in order to change its registered office or registered agent, or both, in the Sta Florida.

)	100 1st Ave N Unit 3601	(t	,) 100 1st	Ave N Unit 3601
· .	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	``		Mailing address of limited hability compa (Note: MAY BE POST OFFICE BOX
	St Petersburg, FL 33701	. <u> </u>	St Peter	sburg, FL 33701
	03/02/2010		L100000	23872
	Date of filing/registration in Florida	4.		Document number
1)	Richard Q. Boylan			
(a)	Registered Agent and Registered Office shown on the records	s of the Florid	a Dept. of Stat	_ le:
	316 13th Ave N			
	Registered Office Address (MUST BE FLORIDA STREE	<u>ET ADDRESS</u>	<u>9</u>	·~ )
	St Petersburg	<sub>FI</sub> 33701		,cł
				- 5
)				
	Enter name of <b>NEW Registered Agent</b> and/or <b>NEW Registe</b>	red Office ad	dress:	CAT 1212 1:03
	100 1st Ave N Unit 3601			1
	NEW Registered Office Address			_
	St Petersburg	FL <sup>33701</sup>		_
	;	FL		-
ha L W	mited liability company is not organized under the nge or changes are made, the Florida street address fill be identical. Or, in the case of a Florida limited reauthorized by an affirmative wate of the member ares of organization or the operating agreement of	s of the regi d liability co rs of the lin	stered offic ompany, it i vited liabilit	e and the business office of the re- is hereby confirmed that the chang ty company or as otherwise provid
Z	halltalle	Ric	hard Q. E	· · · · · · · · · · · · · · · · · · ·
	ure of a member or authorized representative of a member			Printed or typed name of signee
	by accept the appointment as registered agent and ons of all statutes relative to the proper and compl patients of my position as registered agent as prov by reflect a change in the registered office address	agree to ac	t in this cap	pacity. I further agree to complete the complete to complete the compl

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