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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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COVER LETTER

TO:	Registration Section Division of Corporat	ions									
SUBJI	ЕСТ:	DJ		CT							
			Nam	e of Limite	d Liabili	ity Compai	ny				
Dear S	ir or Madam:										
The en	closed Registered Age	ent/Regis	stered Offi	ce Change	and fee(s) are subn	nitted for fi	ling.			
Please	return all corresponde	nce con	cerning thi	s matter to	the follo	owing:					
	D.FAN Nan	A. ne of Per	Jac	K 5-07	<u> </u>						
	フ <u>ブファ</u> Firm	ZFC 1/Compa	T_L ny	LC							
	838 LAN	dress	Lors]	<u> </u>							
	DERAY City/Sta	Best te and Z	14, FL ip Code	334	44					2019 JAN 30	L'ESSE j
13	PTDIRS	Ised for	1 (a) future ann	Come 4 ual report n	etificati	JET on)				亦	
For fur	ther information conc	erning tl	nis matter,	please call:	:					<u>ක</u> 	€,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
D.	×AN Δ. J Name of Per		BON_	_ at ('5 <i>(</i> ,			-453 Daytime T		Number		
	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, Florida	tions ter Circle			Registra Divisio P.O. Bo	iNG ADD ation Secti n of Corpe ox 6327 assee, Flori	on prations				
	Enclosed is a check	for the	following	amount:							
	3 \$25 Filing Fee) \$ 55 Fi	ling Fee &	Certified C	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

rioriae	
I. Na	me of the limited liability company: DJDIRECTLLC (EIN 27-2434598)
2. (a)	838 LAKE SHORE DR (b) 838 LAKE SHORE DR
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	PERRY BEACH, FL 33444 DELLAN BEACH, FL 33444
	1/19/10
3.	Date of filing/registration in Florida L1000003160 Document number
5. (a)	COPPORATION SERVICE COMPAN, Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	1201 HAYS ST.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	TALLAHASEE .FL 32301
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	To a Vi
	838 LAKE SHORE DR.
	NEW Registered Office Address:
	DELEM BEAUL
	FL33444
the cha agent v was/we	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after inge or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cless of organization of the operating agreement of the limited liability company.
(ture of a member or author energies entative of a member Printed or typed name of signee
There.	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in spriting of this climage.

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

INUS18 (2/14)