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LUABASSEC FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Dasis Commercial Cer Name of Limited L	nter, LL C iability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and	I fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Kathleen L Mank, Esquire Name of Person	<u> </u>
Mank & Mank PLLC Firm/Company	
425 South Florida Avenue, Suite Address	<u>10</u> 3
Lareland FL 33801 City/State and Zip Code	
Kathlen @ rnanklaw. wm E-mail address: (to be used for future annual report notif	fication)
For further information concerning this matter, please call:	
Kathleen L. Mank at (Plo3) Name of Person) 808-1344 Area Code & Daytime Telephone Number
Registration Section ReDivision of Corporations Di Clifton Building P.0	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 dlahassee, Florida 32314
Enclosed is a check for the following amount:	
\$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.

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l. Na	me of the limited liabi	lity company:	Dasis				•
2. (a)		Highway dress of limited liabili ST BE STREET ADD	ty company:	(b) <u>と/</u> こ	Mailing address	s of limited liab	1
	Auburndal	e, FL 338.	23			,	Avenue, Suik 103
3.	Date of filing	O O g/registration in Fl		4,	Document	•	i -
5. (a)	Kathleen Registered Agent and Registered Agent and Registered Agent and Registered Agent and Registered Agent Agen	gewood Dri	√ <u>C</u>				I
	Suite 105		_		-	_ <u>(</u>	17 ago
(b) .	Enter name of NEW Region	n Florida			_	JiA LOR	
	Lakeland		, FL_3	33801	-		
the char agent w was/we	mited liability comparinge or changes are may be identical. Or, it is cauthorized by an affectes of organization or	de, the Florida str the case of a Flor firmative vote of t	eet address of th rida limited liabi he members of t	e registered offic lity company, it i he limited liabilit nited liability con	te and the busis hereby corty ty company ompany.	siness office a firmed that t	of the registered he change(s)
Signat	ure of a member or authorit	zed representative of a	member	_Kathle		Mank ped name of sign	nee
I hereb provision the oblit to mere notified	by accept the appointment on sof all statutes relations of my position by reflect a change in Viny viting of this characters of Registered Agent	 nent as registered tive to the proper as registered age the registered offi	avent and avree	to act in this cap rformance of my or in Chapter 60, reby confirm that	pacity. I furt	her avree to	comply with the

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