W11000096026

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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12/12/22--11114--022 **25.00

COVER LETTER

	egistration Section vision of Corporations							
SUBJECT	DEVLYN ENTERPRISES, LLC							
Name of Limited Liability Company								
Dear Sir or	r Madam:							
The enclos	ed Registered Agent/Registered Office Chang	ge ai	nd fee(s) are submitted for filing.					
Please retu	im all correspondence concerning this matter	to th	ne following:					
Adriana Per	гет.							
	Name of Person							
DEVLYN I	ENTERPRISES, LLC							
	Firm/Company							
5621 SW 1			·					
	Address							
Southwest	Ranches, FL 33332							
	City/State and Zip Code							
aontaneda3	@gamail.com							
E-ma	il address: (to be used for future annual repor	t no	tification)					
For further	r information concerning this matter, please ca	all:						
Tracy Pugh	at (⁹⁰)4) 486-8138					
	Name of Person		Area Code & Daytime Telephone Number					
M	ailing Address:		Street Address:					
	egistration Section		Registration Section					
	vision of Corporations		Division of Corporations					
	O. Box 6327		The Centre of Tallahassee					
Ta	illahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enclosed is a check for the following amount:								
	\$25 Filing Fee	0	\$55 Filing Fee & Certified Copy					

TO:

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.	Na	me of the limited liability company: DEVLYN ENTE	RPRISES, I	LLC		
2.	(a)	7 Nantucket Terr, Palm Coast FL 32137	(b)			
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		08/22/2011	1.	.1100009602	26	
3.		Date of filing/registration in Florida	4.	Ī	Document number	
5.	(a)	PUGH, KATELYN				
٠.	(11)	Registered Agent and Registered Office shown on the records of	the Florida [Dept. of State:		
		7 Nantucket Terr,				
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)			
		Palm Coast FI	_32137			
		,··-				
	(b)	Adriana Perez				
Enter name of NEW Registered Agent and/or NEW Registered Office address:						
		5621 CW 106 Laws				
		5621 SW 196 Lane NEW Registered Office Address:				
		Registered Office Address.				
		Southwest Ranches , FI	33332			
1.0	.t 1		- 6.1 G	e cert		
ch	ange	imited liability company is not organized under the later or changes are made, the Florida street address of the	registered	office and	the business office of the registered	
ag	ent v	will be identical. Or, in the case of a Florida limited lierc authorized by an affirmative vote of the members	ability com	ipany, it is	hereby confirmed that the change(s)	
		cles of organization or the operating agreement of the				
_						
	Signa	ture of a member or authorized representative of a member	-		Printed or typed name of signee	
pr the to	ovisi e obl mere	by accept the appointment as registered agent and aging ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I in writing of this change.	ree to act in performan d for in Ch hereby con	n this capa ace of my d apter 605, firm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
<u></u>	Z	m of Registered Agent				

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