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COVER LETTER

TO: Registration Section Division of Corporations	,
SUBJECT: Derrick Boyd, LLC Name of Lim	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Derrick Boyd Name of Person	
Derrick Boyd, LLC Firm/Company	
20929 Riverforest Dr., &	
Land O'Lakes, FL 34638 City/State and Zip Code	
anw 105 a hotmail.com E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	ill:
Descick Rayod at (S13) S57-S082 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 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.

1. Name of the limited liability company: Dell'ick boyd, LLC 2. (a) Dell'ick boyd, LLC Principal office address of limited liability company: Mailing address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST	
· · · · · · · · · · · · · · · · · · ·	
(Note: Mod be district industries)	
Land O'Lakes, FL 34638 Lond O'Lake	B, FL 346
most record annual report florida Limited	00.00
3. Date of filing/registration in Florida 4. Document number	0506
5. (a) Derrick Boyd	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
18709 Yocam Ave.	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	20
	3 6102
Lutz .FL 33599	-
	-9
(b) Derrick Bayod	구 표
Enter name of NEW Registered Agent and/or NEW Registered Office address:	قي. فيد بب
20929 Riverforest Dr.	: 22
NEW Registered Office Address:	:0
Neglitered Office Address.	
Land O'Lakes FL 34638	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confithe change or changes are made, the Florida street address of the registered office and the business offi	onfirmed that after
agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed the	that the change(s)
was/were authorized by an affirmative vote of the members of the limited liability company or as other the articles of organization or the operating agreement of the limited liability company.	ierwise provided in
Signature of a member or authorized representative of a member Defect L. Boy D Printed or typed name of	of signce
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree provisions of all statutes relative to the proper and complete performance of my duties, and I am famil the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docu to merely reflect a change in the registered office address, I hereby confirm that the limited liability contified in writing of this change.	ee to comply with the niliar with and accept ocument is being filed company has been
Signature of Registered Agent	