

LL3000

100 426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

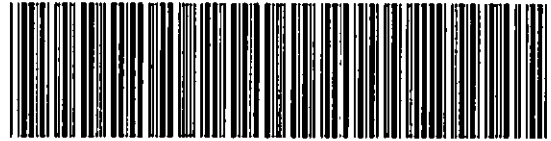
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100337464791

12/09/19--01010--005 **25.00

FILED

2019 DEC -9 AM 10:55

SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS

JAN 11 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dean More, LLC
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:

Omer C. Eyal

Name of Person

Dean More, LLC

Firm/Company

6155 Linneal Beach Drive

Address

Forest City, FL 32703

City/State and Zip Code

remo@t6tactical.com

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

For further information concerning this matter, please call:

Omer Eyal "Remo" at (407) 252-8300
Name of Person 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

**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: Dean More, LLC
2. (a) 6155 Linneal Beach Drive Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
- (b) 6155 Linneal Beach Drive Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

Forest City, FL 32703

Forest City, FL 32703

10/24/2018

L18000249665

3. Date of filing/registration in Florida 4. Document number

5. (a) BITMAN, RONNIE J
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

255 Primera Blvd

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Suite 128

Lake Mary, FL 32746

- (b) Omer C. Eyal
Enter name of NEW Registered Agent and/or NEW Registered Office address:

6155 Linneal Beach Drive

NEW Registered Office Address:

Forest City, FL 32703

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Omer C. Eyal

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

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

FILED
2019 DEC -9 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FL