

L13000115383

(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



900261026749

RA  
Change

06/12/14--01009--002 \*\*25.00

FILED  
2014 JUN 12 PM 3:58  
CLERK OF COURT  
FLORIDA  
JANUARY 2014

DDR

6/25/14

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Dyer Knudsen, Pllc

\_\_\_\_\_  
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:

Christopher Dyer

\_\_\_\_\_  
Name of Person

Dyer Knudsen, Pllc

\_\_\_\_\_  
Firm/Company

708 South Church Avenue

\_\_\_\_\_  
Address

Tampa, Florida 33609

\_\_\_\_\_  
City/State and Zip Code

chris@dyerknudsen.com

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

For further information concerning this matter, please call:

Christopher Dyer

at ( 813 )

463-8014

\_\_\_\_\_  
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: Dyer Knudsen, PLLC

2. (a) 708 South Church Avenue (b) 708 South Church Avenue

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

Tampa, Florida 33609

Tampa, Florida 33609

07/01/2013

L13000115383

3. Date of filing/registration in Florida

4. Document number

5. (a) Christopher C. Dyer

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

8520 Government Drive, Suite 4,

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

New Port Richey, FL 34654

(b) Paul J. Knudsen

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

708 South Church Avenue

**NEW** Registered Office Address:

Tampa, FL 33609

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], Partner

Signature of a member or authorized representative of a member

Christopher Dyer, Partner

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  
2011 JUN 12 PM 3:58  
TALLAHASSEE, FLORIDA