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(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
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## **COVER LETTER**

Division of Corporations		
SUBJECT: DOLLAR \$AVER, 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:		
-	· ·	
VATUR FERNI GARADOONI		
(ATHLEEN SAMPSON (Name of Person)		
,		
POLLAR SAVER, LLC		
(Firm/Company)		
169 EAST BLOOMINGDALE AVE		
(Address)		
DOANDON ELODIDA COLCA		
BRANDON, FLORIDA 33511 (City/State and Zip Code)		
(0.3,2000 = 2.14, 0.10)		
For further information concerning this mat	ter njesse call	
of radar mornador concerning and ma	ier, prease can.	
VATHANIEL J. BELL, ESQ	at ( 813 ) 621-5962	
(Name of Person)	(Area Code & Daytime Telephone Number)	
,	, , , , , , , , , , , , , , , , , , , ,	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
<b>☑</b> \$25 Filing Fee	☐ \$55 Filing Fœ & Certified Copy	

TO: Registration Section

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: DOLLAR \$	AVER, LLC
2. (a) Principal office address of limited liability compar	189 FAST BLOOMINGDALE AVE
(Note: MUST BE STREET ADDRESS)	BRANDON, FLORIDA 33511
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	169 EAST BLOOMINGDALE AVE BRANDON, FLORIDA 33511
	五 2
11/05/2013	L13000155538
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	CORPORATION SERVICE COMPANY 17
Registered Office Address:	1201 HAYS STREET TALLAHASSEE, FL 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	W Registered Office address:  NATHANIEL J. BELL, P.A.
NEW Registered Office Address:	8409 LAUREL FAIR CIRCLE
(MUST BE FLORIDA STREET ADDRESS)	SUITE 101
	TAMPA ,FL 33610
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company.  (Signature of another or authorized representative of a member)	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
KATHLEEN SAMPSON (Printed or typed name of signee)	<del>_</del>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. On, if this document is being filed to merely reflect a confight that the including the company has been notified.  (Signature of Registered Agent)	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby a lin writing of this change.

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