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R. WHITE

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DVP Investments 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:		
Robert Scott Dee Name of Person		
DUP Investments		
Firm/Company Colo N 32 Pole Address		
Hollywood, FC 3302(City/State and Zip Code		
Scotta deevet products com E-mail address: (to be used for further annual report notification)		
For further information concerning this matter, please call:		
S c o H D e e at (954) 454-8700 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 & 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.

	Dul To make a
1. Nan	ne of the limited liability company: DVP Javes Ineu 15
2. (a) _	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MiamiGardons FC 33168 Hollywood FL 3302
	2/18/14
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Robert S. Dee
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	1011 Park Centre Blud
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	33 MC = 33
	Miani Gardens, FL 33024 SS/67
(b) _	Robert S. Dee
. , -	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	610 N 32nd Ave
	NEW Registered Office Address:
	,
	Hollgwood ,FL 33021
If the li	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the chai	nge or changes are made, the Florida street address of the registered office and the business office of the registered
agent w	rill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) re authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the artic	cles of organization or the operating agreement of the limited liability company.
1/1	ure of a member or authorized representative of a member Ackert Scott Decented or typed name of signee
Signat	ure of a member or authorized representative of a member Printed or typed name of signee
I herel provisi the obl to mere notified	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.

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