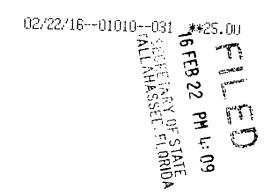
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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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FEB 23 2016 N. CAUSSEAUX

COVER LETTER

i a	TO: Registration Section Division of Corporations			
	SUBJECT: Dory Management 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:			
	Rose J. Pagan Name of Person			
	Dory Management LLC. Firm/Company			
	P. D. Box 354 Address			
	Auburndale Fl. 33823-354 City/State and Zip Code			
	E-mail address: (to be used for future) annual report notification)			
	For further information concerning this matter, please call:			
	Heidy Pagan at (407) 902-4069			
	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 \$25 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. Na	me of the limited liability company:
2 (a)	157 Winona Circle 10) 72018 Lake Agre
2. (a)	Principal office address of limited liability company: (b) 70 E Lake Here Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	Auburndale F1. 33823 P.O Box 354
	Auburndale Fl 33823.254
	04/24/2014 14000066591
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Rose J. Brown
()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	How Unight shrider Circle
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	6 T 17
	The same
	Huburdale FL 33823
	Rose J. Pagan
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	NEW Registered Office Address:
	Auburndale
	1 Marinary
	.FL 33 823
	, FL_330C3
the cha agent v was/we	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after nge or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company.
	Their dy Pagan, Jr. The of a member or authorized representative of a member Printed or typed name of signee
Signa	ture of a member or authorized representative of a member Printed or typed name of signee
provisi the obl to mero 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.
Signatu	re of Registered Agent
	Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (2/14)