Division of Corporations Electronic Filing Cover Sheet

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(((H140002786123)))



H140002765123ABC+

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10:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : 120010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

\*\*Enter the smail address for this business entity to be used for future annual report mailings. Enter only one smail address please. \*\*

Email Address:

## LLC REGISTERED AGENT CHANGE DAGNER PIPES LLC

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## **COVER LETTER**

	Registration Section Division of Corporations		
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SUBJE		· · · · · · · · · · · · · · · · · · ·	
	Name of Li	mited Liability Company	
Dear Si	r or Madam:		
The end	closed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.	
Please 1	return all correspondence concerning the	nis matter to the following:	
Cheyer	nne Moseley		
<del></del>	Name of Person	· · · · · · · · · · · · · · · · · · ·	
Legalzi	com.com, inc.		
	Firm/Company		
100 W.	Broadway Suite 100		
<del></del>	Aldres		
Glenda	ule, CA 91210		
<del></del>	City/State and Zip Code	<del></del>	
dagner	pipes@gmail.com		
E-m	ail address; (to be used for future annual report no	ification)	
For furt	ther information concerning this matter	; please call:	
lmelda	Vasquez	323 962-8600 ext 7950	
	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 2661 Executive Center Circle	P.O. Box 6327	
	Tallahasseo, Florida 32301	Tallahassee, Florida 32314	
	Enclosed is a check for the following	amount:	
	□ \$25 Filing F∞	\$55 Filing Fee & Certified Copy	
INHS18 (	(2/13)		

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

Pursuant to the provisions of sections 605.0114, Floridu 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.

Name of the limited liability company: Dagner Pipes	LLC	<u> </u>	
2. (a) Principal office address of limited liability compa	any 407 Cricket Hollow Lane		
(Note: MUST BE STREET ADDRESS)	Eustis, FL	···	
(NOIS: MUST BE STREET ADDRESS)	32726		
(b) Mailing address of limited liability company:	407 Cricket Hollow Lane		
(Note: MAY BE POST OFFICE BOX)	Eustia, FL		
	32726		
5/20/2014	L14000091354		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept.	of State:	
Registered Agent:	United States Corporati	on Agents, Inc	
Registered Office Address:	13302 WINDING OAK COURT	Α	
	TAMPA, FL 33612		
(b) Enter name of <u>NEW Registered Agent</u> and/or N	EW Registered Office address:	,	
NEW Registered Agent:	Jeyson Andrew Dagner		
NEW Registered Office Address:	407 Cricket Hollow Lane		
(MUST BE FLORIDA STREET ADDRESS)	Eustis		
		,FL 32726	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	e Florida street address of the regi- entical. Or, in the case of a Florid e(s) was/were authorized by an aff	stered office la limited irmative vote of	
Jayson Andrew Dagner Printed or typed pane of signer			
I hereby accept the appointment as registered agent encomply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 605, F.S. Or, if this document is being filed to address, I hereby compiled that the timited liability comp.	d agree to got in this capacity. I f proper and complete performance position as registered agent as m merely reflect a change in the reg any has been notified in writing o	urther agree to e of my dulies, rovided for in istered office f this change.	
Signapore of Registered Agent		Ħ	
Division of Corporations, P.O. Box		TLAI SECRI	
FILING FEE: NHS18 (12/13)	: 252'00	HATE IV	
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