

L14000098062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

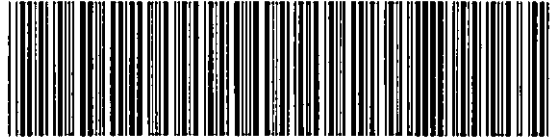
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800329568908

05/31/19--01015--023 **25.00

FILED
2019 MAY 31 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y SULKER

JUN 18 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DX TRIM ENTERPRISE 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:

MARIA C SOUSA

Name of Person

SOUSA & ASSOCIATES INC

Firm/Company

5728 MAJOR BLVD, STE 309

Address

ORLANDO, FL 32819

City/State and Zip Code

DOCUMENTS@SOUSANASSOCIATES.COM

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

For further information concerning this matter, please call:

MARIA C SOUSA

407

800-7026

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 Statute, 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: DX TRIM ENTERPRISE LLC

2. (a) 803 E. DONEGAN AVE

Principal office address of limited liability company.
(Note: MUST BE STREET ADDRESS)

KISSIMMEE, FL 34744

(b) 803 E. DONEGAN AVE

Mailing address of limited liability company.
(Note: MAY BE POST OFFICE BOX)

KISSIMMEE, FL 34744

06/19/2014

3. Date of filing/registration in Florida

L14000098062

4. Document number

5. (a) US TAX CONSULTING INC

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

5401 S. KIRKMAN RD. STE 135

Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)

ORLANDO

FL 32819

(b) SOUSA & ASSOCIATES INC

Enter name of NEW Registered Agent and/or NEW Registered Office address.

5728 MAJOR BLVD, STE 309

NEW Registered Office Address:

ORLANDO

FL 32819

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 of a member or authorized representative of a member

CIMAR DUARTE

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 the change.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00