

U4000188924

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

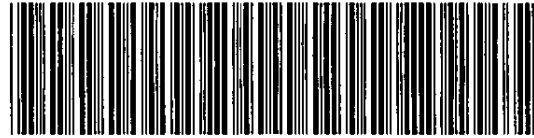
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000291355480

10/26/16--01020--023 \*\*25.00

OCT 27 2016  
S. YOUNG

16 OCT 26 PM 4: 09  
FILING  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PI-DDS 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:

Alessandro A. Giannini

Name of Person

PI-DDS Management, LLC

Firm/Company

5020 Clark Road, Unit 426

Address

Sarasota, FL 34233

City/State and Zip Code

alexgiannini@gadfl.com

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

For further information concerning this matter, please call:

Alessandro A. Giannini

at ( 941 )

350-4637

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 OCT 26 PM 4:09

**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. Name of the limited liability company: PI-DDS Management, LLC

2. (a) 15110 Sundial Place (b) 5020 Clark Road, Unit 426

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

Lakewood Ranch, FL 34202

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

Sarasota, FL 34233

12/10/2014

L14000188924

3. Date of filing/registration in Florida

4. Document number

5. (a) Giovanna Giannini

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

4188 Brookpointe Court

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Sarasota, FL 34238

(b) Alessandro A. Giannini

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

15110 Sundial Place

NEW Registered Office Address:

Lakewood Ranch, FL 34202

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]  
Signature of a member or authorized representative of a member

Alessandro A. Giannini

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 this change.*

[Signature]  
Signature of Registered Agent

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 OCT 26 PM 4: 09