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SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

TO: Registration Section Division of Corporations	•		
SUBJECT: Donne Propertie	es LLC		
Name of Li	mited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
Sandra Donnelly Name of Person			
Donne Properties LLC Firm/Company			
29 Wanamaker ave Address			
Waldwick NT 07463 City/State and Zip Code			
Sidonnelly @itsclonne.co Estail address: (to be used for future annual repo	ort notification)		
For further information concerning this matter, please	call:		
Sandra Donnelly at (201) 424-5402 Area Code & Daytime Telephone Number		
readile of Ferson	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
☐ \$25 Filing Fee	\$55 Filing Fee & Certified Copy		
INHS18 (2/14)	Chacie # 2473		
	Date and FOURTH VOICE		

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.

	Name of the limited liability company:	<u> </u>	YROTCIRILES CLC
2. (:) Sanova Donnelly	(b)	Saudra Donnelly
(Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	29 NANAMAKER AVE		29 NAWAMAKER AUE
	NALDWICK, NJ 07463		WALDWICK, NJ 07463
	1/30/2015		L15000018346
3.	Date of filing/registration in Florida	4.	Document number
5. (a) HENRY J DONNEUT TO Registered Agent and Registered Office shown on the records of the 2700 BATSHORE BLUD, 11-404, Registered Office Address (MUST BE FLORIDA STREET A		·
(i	DONEDIN FL DONEDIN FL		HASS M
	Enter name of NEW Registered Agent and/or NEW Registered of NEW Registered Office Address:	Office addr	EFFL E
	PALIMHTARBOR FL	34	4683
the cagen was/ the a	e limited liability company is not organized under the law hange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of tricles of organization or the operating agreement of the land of a member or authorized representative of a member	the registe bility con f the limit limited lia	tered office and the business office of the register impany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
I he prov the o to m notif	reby accept the appointment as registered agent and agre isions of all statutes relative to the proper and complete p bligations of my position as registered agent as provided erely reflect a change in the registered office address. I h hed in writing of this change.	e to act i performa	in this capacity. I further agree to comply with to time of my duties, and I am familiar with and acc