

215 0000 46742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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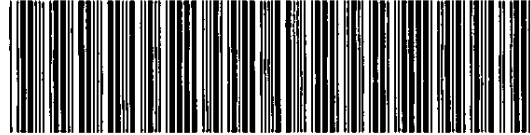
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUN 16 2015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DR3 Limited Liability Company
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:

Daniel E. Ragland II

Name of Person

DR3 Limited Liability Company

Firm/Company

4521 PGA Blvd. Suite 121

Address

Palm Beach Gardens, FL 33418

City/State and Zip Code

dr3llc@gmail.com

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

For further information concerning this matter, please call:

Daniel E. Ragland II at (561) 255-2055
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 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: DR3 Limited Liability Company
2. (a) 4521 PGA Blvd. Suite 121
Principal office address of limited liability company.
(Note: **MUST BE STREET ADDRESS**)
Palm Beach Gardens, FL 33418
- (b) 4521 PGA Blvd. Suite 121
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Palm Beach Gardens, FL 33418
3. 03/16/2015
Date of filing/registration in Florida
4. L15000046742
Document number
5. (a) Crystal D. Potts, Esq.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
3471-A Palm City School Avenue Suite 7
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Palm City, FL 34990
- (b) Crystal D. Potts, Esq.
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
10380 S.W. Village Center Drive #227
NEW Registered Office Address:
Port St. Lucie, FL 34987

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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.

Daniel E. Raglan II
Signature of a member or authorized representative of a member

Daniel E. Raglan II
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