## 1500/23545

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TO: Registration Section Division of Corporations

SUBJECT: DUDE HOLDINGS 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:

**RYAN STURGIS** 

Name of Person

DUDE HOLDINGS LLC

Firm/Company

**102 NE 1ST AVENUE** 

Address

DELRAY BEACH, FL. 33444

City/State and Zip Code

RSTURGIS@DELIVERYDUDES.COM

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

For further information concerning this matter, please call:

RYAN STURGIS	561 900-7060
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	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
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.

Name of the limited liability company:	DINGS LLC
2. (a) 102 NE 1ST AVENUE	(b) 102 NE 1ST AVENUE
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:
DELRAY BEACH, FL.	( <u>Note: MAY BE POST OFFICE BOX</u> ) DELRAY BEACH, FL.
33444	33444
07/20/2015	L15000123545
. Date of filing/registration in Florida	4. Document number
Registered Agent and Registered Office shown on the records of 102 NE 1ST AVENUE. DELRAY BEACH, F Registered Office Address (MUST BE FLORIDA STREET 102 NE 1ST AVENUE	FL. 33444 TADDRESS)
DELRAY BEACH	
, FI	
(b) RYAN STURGIS	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	
SAME	N: 3
<u>NEW</u> Registered Office Address: SAME	
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e change or changes are made, the Florida street address of gent will be identical. Or, in the case of a Florida limited li	aws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in he limited liability company.
	RYAN STURGIS
Signature of a member or authori Af Apresentative of a member	Printed or typed name of signce
hereby accept the appointment as registered agent and ag rovisions of all statutes relative to the proper and complete the obligations of my position as requirered agent as provide o merely reflect a change in the redistered office address. I outfied in writing of this change.	gree to act in this capacity. I further agree to comply with the le performance of my duties, and I am familiar with and accept led for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been
Signature of Registered Agein	
Division of Corporations• P.O. 1	. Box 6327• Tallahassee, FL 32314
FILING F	FEE: \$25.00
\$18 (2/14)	