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| L15000 | 0123545 |
| (Requestor's Name) (Address) (Address) | 300376566073 |
| (City/State/Zip/Phone #) | 11.415.421~-01027022 +#25.00 |
| (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | FILED 2021 NOV 15 AM 6: 50 SECRETARY OF STATE TALLAHASSELFL |
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TO: Registration Section Division of Corporations

Dude Holdings LLC SUBJECT:

ب الحر 🛋

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

1100 Orange Isle

Address

Fort lauderdale FL, 33315

City/State and Zip Code

rsturgis.dd@gmail.com

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

For further information concerning this matter, please call:

ryan sturgis

954 at (

Area Code & Daytime Telephone Number

Mailing Address:

Name of Person

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

261-8789

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed is a check for the following amount:

\$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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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. N | ame of the limited liability company: Dudes Holdings I | LLC | | |
|--|---|---|--|---|
| 2. (a) | | | (b) | |
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | 1100 Orange Isle | | 1100 Or | range Isle |
| | Fort Lauderdale FL, 33315 | | Fort Lau | uderdale FL, 33315 |
| | 7/20/2015 | | L1500012 | 23545 |
| 3. | Date of filing/registration in Florida | 4. | <u></u> | Document number |
| 5. (a) | | | | |
| 5. (u) | Registered Agent and Registered Office shown on the records of | the Flo | rida Dept. of S | State: |
| | Ryan Sturgis | | | |
| | Registered Office Address (MUST BE FLORIDA STREET | ADDR | <u>ESS)</u> | St 101 |
| | 102 NE 1st Ave | | | |
| | Deiray Beach, FI | 33444 | | SECRETARY OF |
| | | | | AN 6: 50 |
| (b) | Enter name of NEW Registered Agent and/or NEW Registered | | | |
| | The name of MENY REPORT of Agent and of MENY Reported | | <u>аџці сал</u> . | TA 5 |
| | Cheryl Wilke | | | |
| | NEW Registered Office Address: | | | ****** |
| | 110 SE 6th Street Suite 2600 | | ···· | |
| | Fort Lauderdale, FI | 33301 | | |
| change agent was/we the art | imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the http://www.icles.com/company/compa | e regist ability of the limite | ered office company, i limited liabi | and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in |
| I herg provisi the oblice to mer notifie | by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete lightons of my possiup as registered agent as provide ely reflect a change in the registered office address, i d in writing of the change. | ree to c perfoi d for i hereby | act in this co mance of m n Chapter 6 confirm the | apacity. I further agree to comply with the ny duties, and I am familiar with and accept 505, F.S. Or, if this document is being filed at the limited liability company has been |

Signature of Registered Agent

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