## L15000 132 423

(Re	equestor's Name)				
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## COVER LETTER

TO: Registration Section Division of Corpora						
DELIVERY (	DUDES LLC					
	Name	of Limited	l Liability Company			
Dear Sir or Madam:						
The enclosed Registered Ag	ent/Registered Offic	e Change a	and fee(s) are submitted for	filing.		
Please return all correspond	ence concerning this	matter to t	he following:			
RYAN STURGIS						
Nar	ne of Person	,				
DELIVERY DUDES LL	С					
Fire	n/Company					
102 NE 1ST AVENUE						
Α	ddress 					
DELRAY BEACH, FL. 3	3444					
City/Sta	ate and Zip Code			, mare s		
RSTURGIS@DELIVER	YDUDES.COM				2010 DEC	
E-mail address: (to be	used for future annu	al report no	otification)		)EC	·
For further information cond	erning this matter, p	lease call:			17	ganta ganta
RYAN STURGIS		561	900-7060	2. E. 19. E.	13	1 1 
Name of Pe	rson	_ \	Area Code & Daytime	Telephone Number	ယ	
STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, Florida	tions tter Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check	t for the following a	mount:				
<b>☑</b> \$25 Filing Fee			\$55 Filing Fee & Certified	Сору		

INHS18 (2/14)

## 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. Na	me of the limited liability company: DELIVERY DU	JDES	LLC	
2. (a)	102 NE 1ST AVENUE	(b) 102 NE 1ST AVENUE		
- (- <i>i</i>	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (-	•	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	DELRAY BEACH, FL.		DELRAY	/ BEACH, FL.
	33444	_	33444	
	08/03/2015		L1500013	32423
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	RICHARD VIENS			
. ()	Registered Agent and Registered Office shown on the records of the 102 NE 1ST AVENUE. DELRAY BEACH, FL Registered Office Address (MUST BE FLORIDA STREET ALL	334	44	- ::
	102 NE 1ST AVENUE			
	DELRAY BEACH .FL 3	3444		
(b)	RYAN STURGIS Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Office ad	dress:	2010 DEC
	SAME			
	NEW Registered Office Address:		<del></del>	<u> </u>
	SAME			2 2 2 E
				$\frac{\overline{Q}_{R}}{2} = \frac{\omega}{2}$
	FL			
the cha agent w was/we the arti- Signat	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liability reauthorized by an affirmative vote of the members of cles of organization for the operating agreement of the liability of a member of the liability and agreement of the liability accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete programs of my position as registered agent as provided by reflect a change in the registered office address. I he	he registed in the limited lim	stered office ompany, it is ited liability iability con AN STUR	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in appany.  GIS  Printed or typed name of signce  Therefore, I further garee to comply with the
noujied	to reflect a change in the registered agent as provided in the registered office address, I he in writing of this change.	reby co	onfirm that	the limited liability company has been

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

INHS18 (2/14)