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2019 SEP 30 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FL

SEP 01 2019

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations


September 16, 2019

HANNAH CLARKE  
9052 DOWDEN RD APT 207  
ORLANDO, FL 32827

SUBJECT: DTB & TRAVEL, LLC  
Ref. Number: L15000189121

We have received your document for DTB & TRAVEL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly. *- Amended 9/24/19 HLE*

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned. 

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Wood  
Regulatory Specialist II

Letter Number: 519A00019123

RECEIVED

2019 SEP 30

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DTB & Travel 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:

Hannah Clarke  
Name of Person

Firm/Company

9052 Dowden Rd. Apt 207  
Address

Orlando, FL 32827  
City/State and Zip Code

hclarke8806@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hannah Clarke at (407) 414-5801  
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: DTB + Travel, LLC
2. (a) Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
9052 Dowden Rd. Apt 207  
Orlando, FL 32827
- (b) Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
9052 Dowden Rd. Apt 207  
Orlando, FL 32827
3. 11/9/15 Date of filing/registration in Florida
4. L15000189121 Document number

5. (a) ~~Registered Agent and Registered Office shown on the records of the Florida Dept. of State:~~  
United States Corporation Agents, Inc.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

5575 S. Semoran Blvd. Suite 36  
Orlando, FL 32822

- (b) Hannah Clarke  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

9052 Dowden Rd.

NEW Registered Office Address:

Apt. 207

Orlando, FL 32827

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TALLAHASSEE, FL

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.

[Signature]  
Signature of a member or authorized representative of a member

Hannah Clarke  
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