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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

LLC REGISTERED AGENT CHANGE **D&G TENNIS, LLC**

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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. N	Same of the limited liability company: $\overline{D&G}$ [6]	ennis,	LLC	<u></u>		
2. (a)		((b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			lailing address of limited hability company: (Note: MAY BE POST OFFICE BOX)		
	12/01/2015		L150001	L98461		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a	, JOSEPH, JOHN P. ESQ					
	Registered Agent and Registered Office shown on the records 2429 CENTRAL AVE NORTH, STE Registered Office Address (MUST BE FLORIDA STREE		TACULAR SECURIO	2021 0€0		
	ST PETERSBURG	_{FL} 3370)2	ASS	=	FILED
(b _.	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered 7901 4th St N NEW Registered Office Address: STE 300	red Office a	ddress:	OF STATE E. FLORIDA	2021 DEC 4 PM : 44	D
	312 300			-		
	St. Petersburg	_{FL} 3370	2			
the chagent was/v	limited liability company is not organized under the range or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street of	of the reg Hiability is of the li he limited	gistered office company, it is mited liabilit I liability con	e and the business office of s hereby confirmed that the y company or as otherwise	the reg	gistered c(s)
	Rilly Park.	Ri —	ley Park	Printed or typed name of signee		
I her provi the ol to me notifi	tature of a member or authorized representative of a member seeby accept the appointment as registered agent and a sions of all statutes relative to the proper and complebilizations of my position as registered agent as proving the reflect a change in the registered office address, and it writing of this change. Bill Havre - Assistature of Registered Agent	ete perjor. ded for in Lhereby	mance of my Chapter 605 confirm that	acity. I further agree to co duties, and I am familiar w 5. F.S. Or, if this document	mply w ith and is bein	accepi 12 filed