L16000116356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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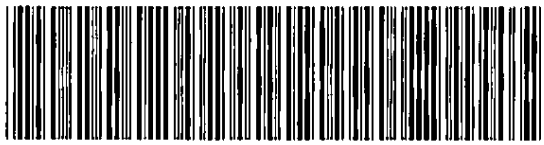

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2024 AUG 19 AM 8:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAKOTA TTT, 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:

TURCESSA HAIGNEY
Name of Person

Firm/Company

3450 S. Ocean Blvd., #319
Address

Palm Beach, FL 33480
City/State and Zip Code

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

For further information concerning this matter, please call:

Turcessa Haigney at (954) 470-6046
Name of Person Area Code & Daytime Telephone Number

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

Street Address:
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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 3, 2024

TURCESSA HAIGNEY
3450 S. OCEAN BLVD., #319
PALM BEACH, FL 33480

SUBJECT: DAKOTA TTT, LLC
Ref. Number: L16000116355

We have received your document for DAKOTA TTT, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 424A00014518

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: DAKOTA TTT, LLC

2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)
928 East Broadway, #6
South Boston, MA 02127

(b) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)

3. 06/20/2016 Date of filing/registration in Florida

4. L16000116355 Document number

5. (a) Bernard A. Singer, ESQ. Registered Agent and Registered Office shown on the records of the Florida Dept. of State
3107 Stirling Rd., Ste. 104 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Ft. Lauderdale FL 33312

(b) Turcessa Haigney Enter name of NEW Registered Agent and/or NEW Registered Office address
3450 S. Ocean Blvd. NEW Registered Office Address
Apt. 319
Palm Beach FL 33480

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.

Ty Edwards
Signature of a member or authorized representative of a member

Ty Edwards
Printed or typed name of signee

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.

Turcessa Haigney
Signature of Registered Agent

Turcessa Haigney

FILED
2024 AUG 19 AM 8:54
TALLAHASSEE, FLORIDA

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

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