## 116000141650

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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2015 OF -5 P 1: 42
SECRETARY OF STATE

**S Warren** SEP 0 **8** 2016

## **COVER LETTER**

Division of Corporations	
SUBJECT: Danish Holdings, 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 ma	atter to the following:
Charlotte Oliver	
Name of Person	
Danish Holdings, LLC	
Firm/Company	
1414 Court Street	
Address	
Clearwater, Florida 33756	
City/State and Zip Code	
charlotteyoliver@gmail.com	
E-mail address: (to be used for future annual i	report notification)
For further information concerning this matter, plea	ase call:
Charlotte Oliver	844 252-1336
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	ount:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

## STÄTEMENT 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	ame of the limited liability company:Danish Holdi	ings, LL	C	
2. (a)		/1.3		
• /	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	<u> </u>		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1414 Court Street			
	Clearwater, Florida 33756	_		
	07/28/2016	ı	L1600014	41650
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Ken Keys			
()	Registered Agent and Registered Office shown on the records of 135 92nd Avenue, Apt 4	the Florida	Dept. of State	- e:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	<u>}</u>	-
	Transus Island	22700		- 1 <sub>66</sub> - <mark>128</mark>
	Treasure Island , FL	33706		77
(b)	Monique Oliver			market
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	lress:	
	1414 Court Street			ARY OF STATE
	NEW Registered Office Address:			DA Z
	Clearwater , FL	33756		•
the cha agent v was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited likere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regis ability co of the limi	tered office mpany, it is ited liability ability con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
Signa	tyre of a member or authorized representative of a member			Printed or typed name of signee
provisi the obj to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I is discount to the change in writing of this change in the registered office address, I is a change in the change	ree to act performa d for in C hereby co	in this cap ince of my hapter 605 infirm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been

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