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(Requestor's Name)	-	
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(Address)		
(City/State/Zip/Phone #)	_	
(Only Otal Of 2 lpt 1 Hollo s)		
PICK-UP WAIT MAIL		
	_	
(Business Entity Name)		
(Document Number)	_	
Certified Copies Certificates of Status	-	
Special Instructions to Filing Officer:	٦	
Special instructions to rining officer.		
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SEPRETARY OF STATE TABLAHASSEE, FLORIDA



## COVER LETTER

Division of Corporations		
SUBJECT: DYC PAC(7) 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:	
DANIELA TOMB Name of Person	10 N	
DYC PACIFIC LL Firm/Company	<u>C</u>	
5010 TAMIAMI TRAIL Address	N•	
NAPLES, FL, 34103 City/State and Zip Code		
Chabaydaniela o gmou E-mail address: (to be used for future annua	Locoly Il report notification)	
For further information concerning this matter, pl	lease call:	
Daniela Tombion Name of Person	at (239 ) 593 - 2193  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	

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.

A 40 A A C. T. C	<b>A</b> /
1. Name of the limited liability company: DYC PACIFIC	LLC
· · · · · · · · · · · · · · · · · · ·	NE RIDGE RY
	ddress of limited liability company:  MAY BE POST OFFICE BOX
STE9 STE9	
NAPCES, FL, 34/08 NAPCE	5,76,34108
October 3:-2017 100	
	nent number
5. (a) DANIELA TOMBION  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
1410PINE RIDGE RD & STE 9	17 SE
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	OCT PT
DYC PACIFIC LLC	FILED OCT -6 PM JABOURGE FILANASSEE, FILANASSEE, FIL
NAPCES ,FL 34108	
(b) DANIECA TOMBION	ORIU ORIU
Enter name of NEW Registered Agent and/or NEW Registered Office address:	20 A
DYC PAC(FIC LLC  NEW Registered Office Address:	
5010 TAMIANITRAIL IV.	
NAPCES , FL 34103	
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 th agent will be identical. Or, in the case of a Florida limited liability company, it is hereby	y confirmed that the change(s)
was were authorized by an affirmative vote of the members of the limited liability company, the articles of organization or the operating agreement of the limited liability company.	· ·
Signature of a member or authorized representative of a member Printed	TOMBION  or typed name of signee
I hereby accept the appointment as registered agent and agree to act in this capacity. I	I further agree to comply with the
provisions of all statutes relative to the proper and complete performance of my duties, the obligations of my position as registered agent as provided for in Chapter 605, F.S. (	and I am familiar with and accept Or, if this document is being filed
to merely reflect a change in the registered office address, I hereby confirm that the limit notified in writing of this change.	иса наонну сотрапу nas veen
Signature of Registered Agent	