9/20/2019



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To: **Division of Corporations** Fax Number : (850)617-6383 From: Account Name : REGISTERED AGENTS INC. Account Number: 120090000081 Phone : (307)200-2803 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 DAME'S VENTURES, LLC

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O SIMMONS

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.

l. Na	ime of the limited liability company: Dame's V	entu	ires, Ll	LC	
2. (a)	6606 BOB HEAD RD.	њ 6606 BC		OB HEAD RD.	
. (.,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `.`	<i>′</i> — — — — — — — — — — — — — — — — — — —	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	PLANT CITY, FL 33565	<u>-</u>	PLANT (CITY, FL 33565	
	10/07/2016		L160001	186316	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	UNITED STATES CORPORATION AGENTS	, INC.			
. (11)	Registered Agent and Registered Office shown on the records of th	e Florida	a Dept. of State	- !:	
	5575 S. SEMORAN BLVD				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	ភ្	-	
	SUITE 36				
	ORLANDO .FL	3282	2	•	
(42)	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered Co. 7901 4th St N	Office ad	dress:		
	NEW Registered Office Address			-	
	STE 300				
	St. PetersburgFL3	33702	2		
he cha igent w was/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	he regi pility co the lin	stered office ompany, it is nited liability	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
7	Zilm Pak	Rile	ey Park		
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee	
rovisi he obl o mere wiffec	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I had I in writing of this change. Bill Havre - Assistant	erform for in (ereby c	ance of my o Chapter 605 onfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been	

Signature of Registered Agent