

L17000047217

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

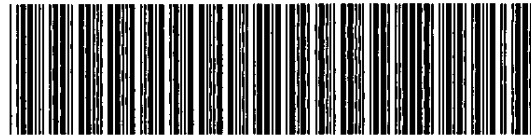
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/20/17--01040--017 **25.00

17 APR -3 AM 11:01

FILED
CLERK OF COURT
JUDICIAL DEPARTMENT

APR 07 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: done by Deroc 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:

Louise Hebert

Name of Person

done by Deroc

Firm/Company

840 Lafayette St

Address

Cape Coral FL 33904

City/State and Zip Code

Louise.marie.hebert@aig mail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louise Hebert

Name of Person

at (203) 231-8554

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 22, 2017

LOUISE HEBERT
840 LAFAYETTE ST
CAPE CORAL, FL 33904

SUBJECT: DONE BY DEROC LLC
Ref. Number: L17000047217

*Write request
check payable to
document #
who to write check
made to
letter signed*

We have received your document for DONE BY DEROC 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 017A00005492

17 APR -3 AM 11:01

FILED
STATE DEPT OF STATE
TALLAHASSEE, FLORIDA

2017 APR -3 PM 12:54
TALLAHASSEE, FLORIDA

ADDRESS CHANGE

Thank you
Louise Hebert

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: done by Dera LLC
2. (a) 840 Lafayette St
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Cape Coral FL 33904
- (b) 840 Lafayette St
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Cape Coral FL 33904
3. 2/28/2017
Date of filing/registration in Florida
4. L17000047217
Document number
5. (a) Joseph Hebert
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
605 SE 4th Place
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Cape Coral, FL 33904
- (b) ~~XXXXXXXXXXXXXXXXXXXX~~ lmb
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
~~XXXXXXXXXXXXXXXXXXXX~~ lmb
NEW Registered Office Address:
~~XXXXXXXXXXXXXXXXXXXX~~ lmb, FL ~~XXXXXXXXXXXX~~

change business
address
From
605 SE 4th Place
Cape Coral FL
33990
to
840 Lafayette St
Cape Coral FL
33904

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.

Joseph Hebert
Signature of a member or authorized representative of a member

LOUISE HEBERT
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.

Joseph Hebert
Signature of Registered Agent