

L17000201938

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

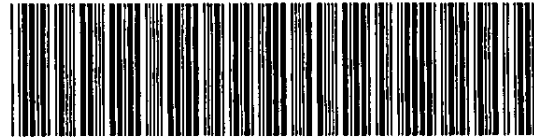
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. SCOTT

OCT 5 2017

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Doral Toys 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:

Marielle Bernhardt

Name of Person

Doral Toys LLC

Firm/Company

4251 Salzedo St. #204 E

Address

Coral Gables FL 33146

City/State and Zip Code

marielle.bernhardt@gmail.com

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

For further information concerning this matter, please call:

Marielle Bernhardt at ( 305 ) 890-6544

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:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

Hi!  
My name and  
lat name are  
backwards!

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: DORAL TOYS LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

\_\_\_\_\_  
\_\_\_\_\_

3. Sept 29 2017 4. L 17 000201938  
Date of filing/registration in Florida Document number

5. (a) BERNHARDT MARIELLE  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

10732 NW 58 St.  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
DORAL FL 33178  
\_\_\_\_\_, FL

(b) MARIELLE BERNHARDT  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

same  
NEW Registered Office Address:  
\_\_\_\_\_  
\_\_\_\_\_, FL

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TALLAHASSEE, FLORIDA

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.

Marielle Bernhardt Marielle Bernhardt  
Signature of a member or authorized representative of a member 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.*

Marielle Bernhardt  
Signature of Registered Agent