117000203949

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

Office Use Only



300305815883

11/27/17--01017--002 **25.00

17 NOV 27 AN III



COVER LETTER

TÖ: Registration Section Division of Corporations						
SUBJECT: ROYAL DAK INTERIORS 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:						
KRISTINA MARSH Name of Person						
ROYAL OAK TNTERIORS LLC Firm/Company						
305 LANE SEMINARY CIR. Address						
MAITIAND FL. 32751 City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Sereny Bell at (678) 478-8505 Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: MAILING ADDRESS:						
Registration Section Registration Section						
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327						
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301						
Enclosed is a check for the following amount:						
\$25 Filing Fee \$25 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.

l. Na	nme of the limited liability company:	OAK	INTERI	دعمه	
2 (a)	305 (ARE SEMINARY CIR	(b)	Spr	ne	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mail	ing address of limited lote: MAY BE POST	
	MAITLAND FL. 3275]	 ·			
3.	Date of filing/registration in Florida	- _{4.} –	Do	cument number	
5. (a)	TEREMY BULL				
J. (a)	Registered Agent and Registered Office shown on the records of the	he Florida I	Dept. of State:		
			•		<u>a</u> = 4
	Registered Office Address MUST BE FLORIDA STREET A				"
	Registered Office Address [MOST BE FLORIDA STREET A	(DDK1:33/		7.	FILE NOV 27
					27 m
	MATTLAND ,FL	72	251		
	THE CON.	20	73 ,	- ;	ALT: O
(h)	KRISTINA MARSH				
(0)	Enter name of NEW Registered Agent and/or NEW Registered		ress:		> -
	305 LAKE SEMINARY	, .	τa		
	NEW Registered Office Address:		110		
					
	MAJILAND, FL	327	15]		
If the i	imited liability company is not organized under the law	us of the S	State of Florid	la it ic baraby con	firmed that after
	ange or changes are made, the Florida street address of				
	will be identical. Or, in the case of a Florida limited lia				
was/we	ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	i the iimi limited li:	ability compa	ompany or as other nv.	rwise provided in
	1 9 9				ura a
Signa	ture of a member or authorized representative of a member		Pr	RYAN BO	signee
I here provisi the obl to mer	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	ee to act i	in this capacii	tv. I further agree	to comply with the
$\frac{\sqrt{}}{c}$	108 rus				
Signatu	ire of Registered Agent				