## 417000207464

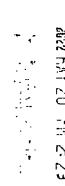
(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP	WAIT MAIL						
(Busines	s Entity Name)						
(Document Number)							
Certified Copies	Certificates of Status						
Special Instructions to Filing Officer:							

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JUL 25 2022 M. SO'LOMO44

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJI	DOERR TO DOERR PAINTIN	G, LLC			
		Name of Limite	ed Liability Company		
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered	Office Change	and fee(s) are submitted for filing.		
Please	return all correspondence concernin	g this matter to	the following:		
ROBE	RT A DOERR JR.				
	Name of Person				
PRECI	SION PAINTING PROS, INC				
	Firm/Company				
1242 S	W PINE ISLAND RD STE 42-362			- 4	2622 MAY
	Address				P2
CAPE (	CORAL/FL/33991				0
	City/State and Zip Co	de			$\dot{\wp}$
PRECIS	SIONPAINTINGPROSCORP@GMAII	L.COM		-	29
Е	-mail address: (to be used for future	annual report n	otification)		
For tur	ther information concerning this ma	itter, please call:			
ROBER	T DOERR	239 at (	240-0574		
	Name of Person	(	Area Code & Daytime Telephone Num	ber	
	Mailing Address:		Street Address:		
	Registration Section		Registration Section		
	Division of Corporations		Division of Corporations		
	P.O. Box 6327		The Centre of Tallahassee		
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		
			Tallahassee, FL 32303		
	Enclosed is a check for the follow	ving 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.

1. N	ame of the limited liability company: DOERR TO DO	ERR PA	INTING, LI	.c			_
2. (a)			(b)				
_, (_,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limite			-
	1242 SW PINE ISLAND RD		1242 SW	V PINE ISLAND RD ST	Е 42-36	2	
	CAPE CORAL, FL 33991		CAPE C	ORAL, FL 33991			
	10/06/2017		L1700020	7464			
3.	Date of filing/registration in Florida	— 4.		Document number			
5. (a)							
5. (a)	Registered Agent and Registered Office shown on the records of	f the Flor	ida Dent. of St	<del></del>			
	ROBERT A. DOERR JR.						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE		<del></del>			
	3527 NW 19TH TERRACE	12828281	<u>,</u>				
	CARE CODAL	22002		<u> </u>		•	
	CAPE CORAL, FI	L <u>33993</u>			£,	503	
						1622 MAY 20	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	4 ()65		<del></del>	1.	7 2	•
	Enter hante of NEW Registered Agent and/or NEW Registered	u Office	aduress:				
	ROBERT DOERR				•		;
	NEW Registered Office Address:			<del></del>	3	ان ان	
	1242 SW PINE ISLAND RD STE 42-362					us:	
				<u>—</u>			
	CAPE CORAL , FI	_33991 L					
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of the organization or the operating agreement of the	registe ability of of the li limited	red office a company, it mited liabil	nd the business office is hereby confirmed the ity company or as other or and ity.	of the i	egister change	red (s)
Signa	ture of a member or authorized representative of a member		. =	Printed or typed name of	of signee	_	
provisi the obl to merc	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete in its of my position as registered agent as provideely reflect a change in the registered office address. It is writing of this change.	ree to a perfori d for in hereby	ct in this cap nance of my Chapter 60 confirm thad	pacity. I further agree duties, and I am fami 5, F.S. Or, if this doc t the limited liability c	e to con iliar wii ument i ompany	iply wi h and i s being has b	th the accept g filed een
Signatu	re of Registered Agent						