## 14000225541

(Requ	uestor's Name)				
(Addre	ess)				
(Addr	ess)				
(City/s	State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Busin	ness Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Fil	ling Officer:				
J. HORNE					
APR 1	1 2022				
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Office Use Only



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SECRLTARY OF STATE TALLAHASSEE, FL

March 25, 2022

DANA DEVLIN 1646 PAM CIRCLE BELLE ISLE, FL 32809 US

SUBJECT: HOMES WITH DANA, LLC

Ref. Number: L17000225541

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Letter Number: 922A00007060

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Home W; H	ted Liability Company
Dear Sir or Madam:	, ,
The enclosed Registered Agent/Registered Office Chang-	a and fools) are submitted for filing
	_
Please return all correspondence concerning this matter to	o the following:
Dank Darlin	
Name of Person	
Firm/Company	
1646 Pam Circle	
Address	
Belle Isle Fr 3 City/State and Zip Code	2809
dandorin Estino, co E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please cal	
D-15	
Name of Person at (4)	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

## 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. Nar	ne of the limited liability company: Homes	<u> </u>	ith	Dena	UC	
2. (a) _	1646 Rim Circle	(b)	16	46 Ru	m Sircle	)
	Principal office address of limited liability company:	_ (4/		Mailing address	s of limited liability com	
	(Note: MUST BE STREET ADDRESS)		.~	( <u>Note: MAY</u>	' BE POST OFFICE BO	<u>9X</u> )
	Belle Isle +C		130	<u> 11e - 5</u>	le th	
	32869	_ ,		<u> 3</u> 2	4809	
_	10/31/17		4	70006	<del>77</del> 5541	
3.	Date of filing/registration in Florida	4.		Document n	umber	
5. (a)	Jacfer Charfani					
` ' -	Registered Agent and Registered Office shown on the records of th	 ιe Florida Γ	Dept. of St	ate:		
	255 S OCCOGO ACCE					
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)		_		
	Ste. 1401					
	0/61/10/	20		<del>-</del>	<b>202</b> SE TAL	
	<u> </u>	200	<u> </u>	_	2 APR	-11
(b) _	Dená Deulia			_	<b>% -5</b> ETARN HASSI	=
1	Enter name of NEW Registered Agent and/or NEW Registered (	Office addr	ress:		.33 PO 7	M
	1646 Rim Circle			_	AM 9: 03 OF \$141 E. FLUGGE	Ö
,	NEW Registered Office Address:	O =			<sub>਼ੋਜ</sub> ਨ	
	Belle Isle th	378	109			
	121					
	, FL					
change of	mited liability company is not organized under the laws or changes are made, the Florida street address of the re ill be identical. Or, in the case of a Florida limited liab	egistered	office a	nd the busines:	ss office of the regis	tered
was/wer	e authorized by an affirmative vote of the members of	the limit	ed liabili	ity company or	r as otherwise provi	ded in
the artic	les of organization or the operating agreement of the li	mited ha	bility co	mpany.	\- II	
Signatu	ere of a member or authorized representative of a member			Printed or type	ed name of signee	
	v accept the appointment as registered agent and agree	e to act is	i this con		_	with the
provisio the oblig to merel	waccept the appointment as registered agent and agree ins of all statutes relative to the proper and complete pagations of my position as registered agent as provided to reflect a change in the registered office address. I he in writing of this change	erforman for in Ch reby con	ce of my apter 60 firm that	pactive r jurine duties, and I of 5. F.S. Or, if i t the limited lia	er agree to comply am familiar with an this document is being ability company has	with the d accept ing filed been
Signature	of Registased Agent					
~ ismaille	OF ICE BROWN TECH					