4/23/2020

**Division of Corporations** 



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To:	Division of Comparting		2020 A	
	Division of Corporations		APR	
	Fax Number : (850)617-6383			
		•	$\sim$	•
From:			$\omega$	-
	Account Name : REGISTERED AGENTS INC.		70	ŧ
	Account Number : I20090000081		2	1
	Phone : (307)200-2803	:	3	•
	Fax Number : (855)330-1010		а С	

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

	LLC REGISTERED AC DOR2DOR,	
2020 APR 23	Certificate of Status	0
	Certified Copy	0
	Page Count	02
202	Estimated Charge	\$25.00

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Help O SIMMONS

## 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: DOR	2DOR, LLC	·····		
2. (a)	1625 N.COMMERCE PARKWAY	COMMERCE PARKWAY (b) 1625 N.COMMERCE PARK			/AY
(,	Principal office address of limited liability com ( <u>Note: MUST BE STREET ADDRESS</u> )	pany:	Mailing address of li		pany:
	315		5		
	WESTON, FL 33326	WE	STON. FL 33326		
	11/28/2017	L170	000243381		
3.	Date of filing/registration in Florida	4.	Document num	iber	
5. (a)	KSDT & COMPANY				
J. (4	Registered Agent and Registered Office shown on the r	of State:			
	9300 S.DADELAND BOULEVA	RD		202	
	Registered Office Address (MUST BE FLORIDA S	STREET ADDRESS)		2020 APR	
	600			भ २३	:
	MIAMI	. <sub>FL</sub> 33156		3 PH	1
(b)	Northwest Registered Ag		<u>i</u> <u>i</u>	د <del>بر</del> ا	
(0)	Enter name of NEW Registered Agent and/or NEW R	legistered Office address:			
	7901 4th St N				
	NEW Registered Office Address:	art			
	STE 300				
	St. Petersburg	, <sub>FL</sub> 33702			
the ch agent	limited liability company is not organized unde ange or changes are made, the Florida street ad will be identical. Or, in the case of a Florida li- ere authorized by an affirmative vote of the me	ldress of the registered inited liability compan	l office and the busines by, it is hereby confirm	ss office of the r ned that the char	egistered igc(s)

the articles of organization or the operating agreement of the limited liability company.

 Signature of a member or authorized representative of a member
 Morgan Noble

 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 the change.

Content of Glover - Assistant Secretary

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00