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COVER LETTER

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TO: Registration Section Division of Corporations

SUBJECT: ______

· . .

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:

George Bacon

Name of Person

Dunston Management, LLC

Firm/Company

1010 East Adams Street, Suite 231

Address

Jacksonville, FL 32202

City/State and Zip Code

GGBACON@GMAIL.COM

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

For further information concerning this matter, please call:

George Bacon	904 487-8171
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 followin	ig 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.

Na	me of the limited liability company:	inagement, LL	
(a)	1010 East Adams Street, Suite 231	(b) 101	0 East Adams Street, Suite 231
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(-/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Jacksonville, FL 32202	Jack	sonville, FL 32202
	12/20/2017	L170	00259195
	Date of filing/registration in Florida	4.	Document number
(a)	George Bacon		
(4)	Registered Agent and Registered Office shown on the records	of the Florida Dept. o	of State:
	7246 St. Augustine Road		
	Registered Office Address (MUST BE FLORIDA STREE	<u>T ADDRESS)</u>	
	Jacksonville	FL_32217	18 FE
(b)	George Bacon		EB 23
、 <i>·</i>	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office address:	
	1010 East Adams Street, Suite 231		STATE
	NEW Registered Office Address:		G ,
	Jacksonville	_{F1} 32202	
the li	imited liability company is not organized under the	of the registered	of Florida, it is hereby confirmed that after office and the business office of the registere y, it is hereby confirmed that the change(s)

"the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being file 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.

Į Signature of Registered Agent-

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