

180000 13774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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JUN 18 2018

FILED
18 JUN 18 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BY SIMMONS
JUN 20 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: entire dwelling

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:

wayne a beckford

Name of Person

entire dwelling

Firm/Company

3319 nw 41 st

Address

lauderdale lakes fl 33309

City/State and Zip Code

dotcdt@gmail.com

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

For further information concerning this matter, please call:

wayne a beckford

at (754)

423 5338

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 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. Name of the limited liability company: entire dwelling
2. (a) 3319 nw 41 street lauderdale lakes fl 33309 (b) 3319 nw 41 st lauderdale lakes fl 33309
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. 06-08-2018 4. 11800013774
Date of filing/registration in Florida Document number

5. (a) blank---- was not filed in
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3319 nw 41 st

lauderdale lakes, FL 33309

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

wayne a beckford

NEW Registered Office Address:

3319 nw 41 st

lauderdale lakes, FL 33309

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Wayne Beckford
Signature of a member or authorized representative of a member

wayne a beckford

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 this change.

Wayne Beckford
Signature of Registered Agent