118000067047

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #	P)				
PICK-UP WAIT	MAIL				
(Business Entity Name)				
(Document Number)					
Certified Copies Certificates o	f Status				
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HILES

LIRO? AMARIS

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	Driftwood Enterprise, LLC						
	Name of	Limited 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 concerning this ma	atter to the following:					
Donal	ld Bullis						
	Name of Person						
Driftw	ood Enterprise, LLC						
	Firm/Company						
335 L	exington CT SW						
-	Address						
Vero I	Beach, FL 32962						
	City/State and Zip Code	·					
cswall	ters21@icloud.com						
E	-mail address: (to be used for future annual	report notification)					
For fur	ther information concerning this matter, plea	ase call:					
Cariss	sa Walters	336 2663067					
	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					

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. Na	me of the limited liability company:	erprise,	LLC				
2. (a)	832 S US Hwy 1	832 S L	JS Hwy 1				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	tue ^r t	Mailing address of limit (Note: MAY BE PO		•	
	Vero Beach, FL 32962	 .	Vero Be	each, FL 32962			·
	3/14/2018	L	180000	67047			
3. 5. (a)	Date of filing/registration in Florida Donald Bullis	4.		Document number	r		
5. (a)	Registered Agent and Registered Office shown on the records of t	he Florida I	Dept. of Sta	te:			
	Registered Office Address MUST BE FLORIDA STREET A		w	_			
	Vero Beach 335 Lexington, FL	32962		_	FAE	2116	
(b)	Donald Bullis				AHAS	ÀPR.	
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	-	RY OF STATE.	-2 PH	
	NEW Registered Office Address:				SEA.	2:0	County.
	335 Lexington CT SW				ΣÜ	2	
	Vero Beach, FL	32962		_			
the cha agent was/we the art Signa I here provis the obt to mer	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of icles of organization or the operating agreement of the force of a member or authorized representative of a member oby accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I is a change of this change.	the registability confirmed limited li	ered office npany, it ted liability contains all Bulli	ce and the business is hereby confirmed ty company or as of mpany. S Printed or typed name pacity. I further ass.	office of that the office of signs	f the rechange provi	egistered ge(s) ded in