

418000134025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

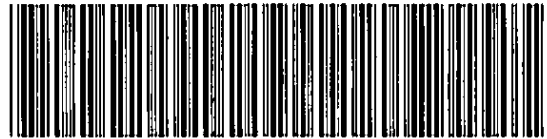
(Document Number)

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18 SEP 19 PM 1:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PP 2 6

S. PRATHI



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 31, 2018

VIRGINIA M. GARCIA  
DOMINICAN SUGAR LLC  
5110 BONNEDALE COURT  
TAMPA, FL 33624

SUBJECT: DOMINICAN SUGAR LLC  
Ref. Number: L18000134025

We have received your document for DOMINICAN SUGAR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Stacy Prather  
Regulatory Specialist III

Letter Number: 518A00015734

2018 SEP 19 PM 11:29

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DOMINICAN SUGAR LLC

\_\_\_\_\_  
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:

VIRGINIA M GARCIA

\_\_\_\_\_  
Name of Person

DOMINICAN SUGAR LLC

\_\_\_\_\_  
Firm/Company

5110 BONNEDALE COURT

\_\_\_\_\_  
Address

TAMPA FL 33624

\_\_\_\_\_  
City/State and Zip Code

internationalsvcs@yahoo.com

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

For further information concerning this matter, please call:

LYNDA G. CALCANO

\_\_\_\_\_  
Name of Person

at ( 813 )

888-9979

\_\_\_\_\_  
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: DOMINICAN SUGAR LLC

2. (a) Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
5110 BONNEDALE COURT  
TAMPA FL 33624

(b) Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
SAME

3. 05/30/2018 Date of filing/registration in Florida

4. L18000134025 Document number

5. (a) VIRGINIA M GARCIA MORETA  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
5110 BONNEDALE COURT  
TAMPA, FL 33624

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

NEW Registered Office Address:  
5110 BONNEDALE COURT  
TAMPA, FL 33624

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.

*Virginia Garcia* VIRGINIA M GARCIA MORETA  
Signature of a member or authorized representative of a member Printed or typed name of signer

*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.*

*Virginia Garcia*  
Signature of Registered Agent

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