

L18000223768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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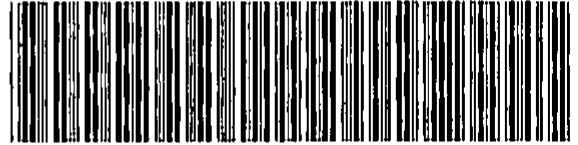
(Business Entity Name)

(Document Number)

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2019 AUG 29 PM 2:43
TALLAHASSEE, FL

SEP 10 2019

C. KIR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The White Dove Cleaning Service 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:

Melissa Graham

Name of Person

The White Dove Cleaning Service LLC

Firm/Company

27150 Elaine Dr

Address

Bonita Springs FL 34135

City/State and Zip Code

info@whitedovecleaningservice.com

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

For further information concerning this matter, please call:

Melissa Graham

239

273-2355

at (_____) _____

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.

The White Dove Cleaning Service LLC

1. Name of the limited liability company: 27150 Elaine Dr, Bonita Springs FL 34135

2. (a) Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

(b) 27150 Elaine Dr. Bonita Springs
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

FL 34135

8/19/2019

3. Date of filing/registration in Florida

4. Document number

United States Corporation Agents, INC

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
13302 Winding Oak Court A

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tampa, FL 33612

Melissa Graham

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

27150 Elaine Dr

NEW Registered Office Address:

Bonita Springs, FL 34135

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.

[Signature]
Signature of a member or authorized representative of a member

Melissa Graham
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 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.

[Signature]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

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