L180002338532

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(======, ====,
(Document Number)
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2021 AUG 10 PH 1:43

August 2, 2021

CHRISTOPHER DESANTIS 20 NEWBURY PLACE NAPLES, FL 34119

SUBJECT: CDS 6 INVESTMENTS, LLC

Ref. Number: L18000238532

We have received your document for CDS 6 INVESTMENTS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Brumbley Regulatory Specialist II

Letter Number: 221A00018032



COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CDS 6 Inves	TMENTS LCC ed 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:	
Christopher De Santis		
Name of Person		
CDS 6 Investments LL Firm/Company	<u></u>	
20 Newbury Place Address		
NAPLES, FL 3416 City/State and Zip Code	OY	
Christopher desantis e hotma E-mail address: (to be used for future annual report		
For further information concerning this matter, please call	l:	
Christopher DeSanhis at (2)	Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
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. Na	me of the limited liability company:CDS_6_Investments, LCC
2. (a)	(b)
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3252 Pacific Drive 3252 Pacific Drie
	Naples, FL 34119 Naples, FL 34119
	10/8/2018 L18000238532
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	· · · · · · · · · · · · · · · · · · ·
	Christopher DeSantis
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	3252 PACIFIC DINE
	Naples Practice Drue Observation De Cooks
(b)	Christopler Dr Sant's Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Christopler DrSant's Enter name of NEW Registered Agent and/or NEW Registered Office address: 20 NewBury Place
	NEW Registered Office Address:
	NADLES 34104
change agent v was/we the arti	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company.
(Wish De South Ure of a member or authorized representative of a member CHRIStopher De South Printed or typed name of signee
Signa	ure of a member or authorized representative of a member Printed or typed name of signec
provisi the obl to merc notified	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the constant of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept gations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been to writing of this change.
Signatu	Church De Souti