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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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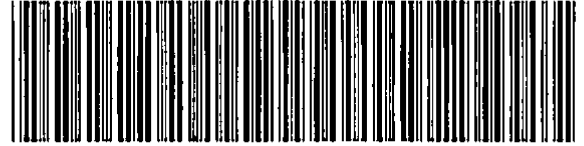
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAS2 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:

DANA VARGOVA
Name of Person

DAS2 LLC
Firm/Company

60 SW 13th STREET, SUIT 3009
Address

MIAMI, FL 331 30
City/State and Zip Code

danavargova77@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANA VARGOVA at (561) 232 0263
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: DAS2 LLC
2. (a) 60 SW 13th STREET Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
SUITE 3009
MIAMI, FL 33130
- (b) 60 SW 13th STREET Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
SUITE 3009
MIAMI, FL 33130
3. 03-14-2019 Date of filing/registration in Florida
4. L19000071777 Document number

5. (a) ANTHONY ASTOLFI
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

4251 SW 32nd Street, WEST PARK, FL 33023

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

4251 SW 32nd Street
WEST PARK, FL 33023

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

60 SW 13th STREET
NEW Registered Office Address:
SUITE 3009
MIAMI, FL 33130

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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.

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

DANA VARGOVA
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.

[Signature]
Signature of Registered Agent