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COVER LETTER

TO: Registration Section Division of Corporations

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Dually Doors LLC SUBJECT: _____

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:

Kristi R King

Name of Person

Dually Diversified LLC

Firm/Company

6866 Pine Forest RD Unit C

Address

Pensacola FL 32526

City/State and Zip Code

duallydiversified@gmail.com

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

For further information concerning this matter, please call:

Kristi R King	850 860-2919 at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303
Produced in a should for the following	

Enclosed is a check for the following amount:

■ S25 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.

. Na	me of the limited liability company:		
2. (a)	6866 Pine Forest RD Unit C Pensacola FL 32526	(b) 6866 Pir	ne Forest RD Unit C Pensacola FL 32526
(11)	Principal office address of limited liability company; (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited hability company: (Note: MAY BE POST OFFICE BOX)
	12/02/2019	L1900028	3441
<u>.</u>	Date of filing/registration in Florida	4.	Document number
5. (a)	Vance Wayne Jones		
. (11)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of St	ate:
	6866 Pine Forest RD		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	Unit C		· · · · ·
	Pensacola, FL	32526	- SECR - T
(b)	Dually Diversified LLC		FILED GRETARY OF STATE
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	AY TIN
	6866 Pine Forest Rd		ARY OF STR
	NEW Registered Office Address:		L'IE O
	Unit C		
	Pensacola, FL	32526	
change agent v was we the orth	imited liability company is not organized under the lave or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of the of organization on the operating agreement of the tare of a member or authorized representative of a member	registered office a ability company, it of the limited liabil limited liability co Kristi R King	ind the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. Printed or typed name of signce
There provisi the obj to mer notifie	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ellyroffect a change in the registered office address, 1) of in writing of this change.	ve to act in this ca performance of m d for in Chapter 60 hereby confirm the	pactive 1 further agree to comply with the y duties, and I am familiar with and accep 05, F.S. Or, if this document is being filed a the limited liability company has been

ð Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00