L20000016061

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
J. HORNE			
JUL 19 2024			

Office Use Only



400432512934

07/10/24--01011--008 **25.00



COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Dan Nirvana Properties		
Name of I	Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Ch	nange and fec(s) are submitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
	 	
Name of Person		
Dan Nirvana Properties		
Firm/Company		
7901 4th St N, STE 300	<u> </u>	
Address		
St Petersburg, Florida, 33702		
City/State and Zip Code		
nirvanagroup@myyahoo.com		
E-mail address: (to be used for future annual re	port notification)	
For further information concerning this matter, pleas	e call:	
Jacquline Lilly	352 484 9533	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amou	int:	
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

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. N	ame of the limited liability company: Dan Nirvana Prop	perties 	
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7901 4th St N STE 300	79	901 4th St N STE 300
	St Petersburg FL 33702	S	t Petersburg FL 33702
	01/09/2020	L20	0000016067
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Jacquline R. Lilly		
J. (L)	Registered Agent and Registered Office shown on the records of	the Florida De	pt. of State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	231 NE 28th Ave, # 107		
	Ocala , FI	J. 34470	
(L)	Registered Agents Inc		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office addres	
	7901 4th St N,		
	NEW Registered Office Address:	, -	
	STE 300		
	St. Petersburg , FI	33702 L	
the cha agent v was/we the art Signa I here provise the obt to mer- natified	imited liability company is not organized under the launge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the street of a member or authorized representative of a member oby accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. If in writing of this change. David Roberts - Assistant S	f the register iability comp of the limited c limited liab Jacqulin	red office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in illity company. R. Lilly Printed or typed name of signee this capacity. I further agree to comply with the

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