420000081H16

(Requ	uestor's Name)	
(Addr	ress)	
/A.I.I.		<u> </u>
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PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doc	ument Number)	1
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
J. HC	RNE	
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SECRETARY OF STATE
TALL AHASSEE OF STATE





RECEIVED

FLORIDA DEPARTMENT OF STATE

Division of Communication of **Division of Corporations**

SECHCIA: Lut 3 TATE TALLAHASSEE, FL

March 17, 2022

JOHANNE MARSEILLE 90 NE 130TH ST NORTH MIAMI, FL 33161 US

SUBJECT: DANDY LION'S MANE LLC

Ref. Number: L20000081416

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. 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.

Letter Number: 522A00006372

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

COVER LETTER

то:	Registration Section Division of Corporations						
SUBJI	SUBJECT:Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	aclosed Registered Agent/Registered Office Change a	and fee(s) are submitted for filing.					
	return all correspondence concerning this matter to t						
	Johanne Marseille Name of Person						
]	Dandy Lion's Mane LLC Firm/Company						
90	NE 130th Street Address						
	orth Miami, FL 33161 City/State and Zip Code						
<u>Joh</u>	anne marseille Egmail. Com	nification)					
For fu	rther information concerning this matter, please call:						
	Name of Person at (305) 413 - 758 9 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					
INHS1	8 (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 (b) 90 NE 130 th 6+ N miam, FL 33 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
3.	3/13/2020 Date of filing/registration in Florida	 	L200	00081416 Document number
5. (a) (b)	Registered Agent and Registered Office shown on the records of the United States Corporation Agents (MUST BE FLORIDA STREET AD S5575 S. Semoran Blvd Orlando FL	Suite 3282	, INC : 36 -2	2022 M. SECR TALLA
change agent v was/we the arti	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of cles of organization or the operating agreement of the linguistic of a member of authorized representative of a member of authorized tepresentative of a member of all statutes relative to the proper and complete per ignations of my position as registered agent as provided for the profession of this change. The organization of this change.	of the St egistered ility comp the limite mited liab	ate of FI office an oany, it i d liabilit oility cor	orida, it is hereby confirmed that after the ad the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in an impany. Printed or typed name of signee