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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC REGISTERED AGENT CHANGE D. PORTHAULT DESIGN HOLDINGS LLC

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TO: Registration Section Division of Corporations

D. PORTHAULT DESIGN HOLDINGS 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:

Joshua Murphy	
Name of Person	
Registered Agent Solutions, Inc.	
Firm/Company	
Corporate Center One. 5301 Southwes	t Pkwy, Ste 400
Address	
Austin, TX 78735	
City/State and Zip Code	
E-mail address: (to be used for future ann	ual report notification)
E-mail address: (to be used for future ann	
For further information concerning this matter.	please call: 888 705-7274 at ()
For further information concerning this matter. Joshua Murphy	please call: at (888705-7274
For further information concerning this matter. Joshua Murphy Name of Person STREET/COURIER ADDRESS: Registration Section	please call: at (888 705-7274 Area Code & Daytime Telephone Number MAILING ADDRESS: Registration Section
For further information concerning this matter. Joshua Murphy Name of Person STREET/COURIER ADDRESS:	please call: at (
For further information concerning this matter. Joshua Murphy Name of Person STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	please call: 888 705-7274 at (
For further information concerning this matter. Joshua Murphy Name of Person STREET/COURIER ADDRESS: Registration Section Division of Corporations	please call: at (
For further information concerning this matter. Joshua Murphy Name of Person STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	please call: at (

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

100 WORTH AVE WINTHROP H	HOUSE UNIT 610		100 WOR	RTH AVE WINTHI	ROP HOUSE UNI
Principal office address of limit					nited liability compan POST OFFICE BOX)
PALM BEACH, FI			PALM		FL 33480
11/25/2020				 0361999	
Date of filing/registration	on in Florida	4.	 -	Document numb	per
BLUMBERGEXCELSIOR	CORPORATE S	ERVIC	ES, INC.		
Registered Agent and Registered Office	e shown on the records o	ithe Flor	ida Dept of Stat	= le:	
155 OFFICE PLA	ZA DR 1S1	FL	OOR		
Registered Office Address (MUST	BE FLORIDA STREET	ADDRE	SS)	-	
				_	
TALLAHASSEE,		323		_	20
	, F	ւ <u>32</u> 3		_	2022 J
Registered Agent So	olutions, Inc.		301	-	
	olutions, Inc.		301	- -	5- KNF 2202
Registered Agent So	olutions, Inc.		301	-	
Registered Agent So Entername of NEW Registered Agen	olutions, Inc.		301	-	
Registered Agent So Enter name of NEW Registered Agen 155 Office Plaza Dr	olutions, Inc.		301	-	2022 JUH -5 PH12: 05
Registered Agent So Enter name of NEW Registered Agen 155 Office Plaza Dr NEW Registered Office Address:	Olutions, Inc.		address:	-	

131	c articles of organization or the appropriate	• • • •	
/s/	Damaris Molina	Damaris Molina	Authorized Person
	Signature of a member or authorized representative of a member	Printed or t	yped name of signee

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 positive of the obspace. notified in writing of this change.

Mackenzie Hart, Asst. Secretary ockersu(1) Signature of Registered Agent