h21000015578

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	#)
PICK-UP WAIT	MAIL
(Business Entity Nam	le)
(Document Number)	
Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	
Office Use Onl	Į.



600395479676

10/17/23--01021--023 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations		·	
SUBJE	Good Dogg Beverage Compan	y LLC		
00202		Name of Limited Liab	bility Company	
Dear S	ir or Madam:			
The en	closed Registered Agent/Registere	d Office Change and fe	ee(s) are submitted for filing.	
Please	return all correspondence concern	ing this matter to the fol	llowing:	
Mark D	. DellaPorta			
	Name of Person	······································	-	
	Name of Person			
Good I	Oogg Beverage Company LLC			
	Firm/Company		-	
1804 W	oodleaf Hammock Court			
	Address		-	
Braden	ton, FL 34211			
	City/State and Zip C	ode	<u>-</u>	
mpdella	aporta@fastmail.com			
E	-mail address: (to be used for futu-	e annual report notifica	ation)	
For fur	ther information concerning this n	atter, please call:		
Mark P	DellaPorta	860 at (326-4291	
	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 2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32314		Tallahassee, FL 32303	
Enclosed is a check for the following amount:				
	■ \$25 Filing Fee	\$55	Filing Fee & Certified Copy	
INHSI	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. Na	me of the limited liability company	Good Dogg Beveag	e Company LLC	
2 (a)			(b)	
(w)	Principal office address of limited (Note: MUST BE STREE) 2238 Samo Road	liability company: ADDRESS)	2238 Sar	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) no Road
	2236 Sallio Road			TO NOW
	Melbourne, FL 32935		Melbourn	ne, FL 32935
	1/05/2021		L2100001	5578
3.	Date of filing/registration	in Florida	4.	Document number
5 (a)				
J. (u)	Registered Agent and Registered Office i	hown on the records of th	e Florida Dept. of St	
	Registered Office Address (MUST B	FLORIDA STREET AL	DPRESS)	
	13571 Luxe Ave., Apt. #108			700
	Bradenton	, FL	4211	
(b)	Enter name of NEW Registered Agent a	nd/or <u>NEW Registered C</u>	office address:	2007 OCT 17 AM II: 02
	NEW Registered Office Address:			
	1804 Woodleaf Hammock Court		 .	
	Bradenton	, FL_	4211	_
change agent was/w the art	e or changes are made, the Florida's will be identical. Or, in the case of ere authorized by an affirmative voicles of organization or the operating	treet address of the nation a Florida limited liable of the members of gagreement of the li	egistered office a ility company, it the limited liabil	Porta
I here provis the obtained to mer notifie	ture of a member or authorized representate by accept the appointment as registions of all statutes relative to the proligations of my position as registered by reflect a change in the registered in writing of this change.	bred agent and agree	e to act in this ca erformance of m for in Chapter 60 reby confirm tha	Printed or typed name of signee pacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been

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