

L21000064080

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

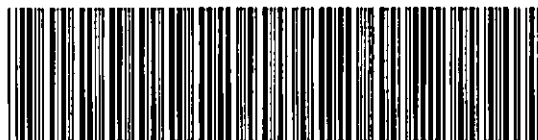
(Business Entity Name)

(Document Number)

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2023 APR 10 PM 1:10
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAJODA, 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:

BONNIE WORTON

Name of Person

DAJODA, LLC

Firm/Company

755 GRAND BLVD, STE B-105-218

Address

MIRAMAR BEACH, FL 32550

City/State and Zip Code

bonnie.w@cox.net

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

For further information concerning this matter, please call:

Bonnie Worton

678

923-4096

at (_____) _____

Name of Person

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 21, 2023

BONNIE WORTON
755 GRAND BLVD.
SUITE B-105-218
MIRAMAR BEACH, FL 32550

SUBJECT: DAJODA, LLC
Ref. Number: L21000064080

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

~~The form you submitted is for a FLORIDA PROFIT CORPORATION,~~ but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 323A00006504

RECEIVED
2023 APR 10 PM 3:25
DIVISION OF CORPORATIONS
REGULATORY SPECIALIST
NEYSA CULLIGAN

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.

2. (a) _____ (b) _____

MIRAMAR BEACH, FL 32550

121000064080

4. Document number

INHS18 (2/14)