

L21000064633

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

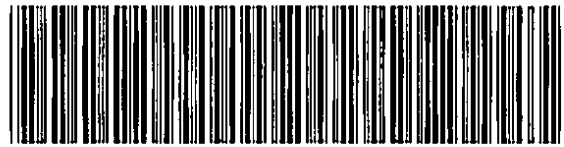
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ALLAHABAD, FLORIDA

2022 SEP 26 AM 10:05

SEP 27 2022
S. PRATHE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dancer Depot
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:

Steve Sechter
Name of Person

Dancer Depot
Firm/Company

8382 Baymeadows Rd STE#4
Address

Jacksonville FL 32254
City/State and Zip Code

Steve Sechter@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steve Sechter at (904) 334 3985
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

September 20, 2022

EXOTICDANCERDEPOT.COM LLC
8382 BAYMEADOWS RD
SUITE 5
JACKSONVILLE, FL 32256

SUBJECT: EXOTICDANCERDEPOT.COM LLC
Ref. Number: L21000064633

We have received your document for EXOTICDANCERDEPOT.COM LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$125.00.

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) 245-6939.

Stacy Prather
Regulatory Specialist III

Letter Number: 122A00020905

FIVE

2022 SEP 26 PM 3:31

CLERK
ISSUED

**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. Name of the limited liability company: Dancer Depot

2. (a) 8382 Baymeadows RD (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

STE #4 Jacksonville
FL 32254

3. 2/8/21 Date of filing/registration in Florida 4. L210000064633 Document number

5. (a) Tocket Lawyer Corporate Services, LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1550 Office Plaza Drive
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

10th Floor
Tallahassee, FL 32301

(b) STEVEN Sechler Sechler
Enter name of NEW Registered Agent and/or NEW Registered Office address:

8382 Baymeadows Rd
NEW Registered Office Address:

Ste #4
Jacksonville, FL 32256

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

STEVE Sechler
Printed or typed 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 notified in writing of this change.

[Signature]
Signature of Registered Agent