

h21 000069058

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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OCT 30 2021
I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TLD LAND, 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:

Neil A. Saydah

Name of Person

Saydah Law Firm

Firm/Company

7250 Red Bug Lake Rd., Suite 1012

Address

Oviedo, FL 32765

City/State and Zip Code

talonmarineservices@yahoo.com

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

For further information concerning this matter, please call:

Neil A. Saydah

Name of Person

at (407)

956-1080

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

2021 OCT 22 AM 8:05

September 30, 2021

NEIL A. SAYDAH
SAYDAH LAW FIRM
7250 RED BUG LAKE RD - STE. 1012
OVIEDO, FL 32765

SUBJECT: TLD LAND, LLC
Ref. Number: L21000069058

We have received your document for TLD LAND, 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 Profit Corporation, but your entity is a Limited Liability Company. 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.

Irene Albritton
Regulatory Specialist III

Letter Number: 421A00023740

**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: TLD LAND, LLC

2. (a) 439 Aulin Ave (b) 439 Aulin Ave
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

Unit B Unit B
Oviedo, FL 32765 Oviedo, FL 32765

02/09/2021 L21000069058
3. Date of filing/registration in Florida 4. Document number

5. (a) SAYDAH LAW FIRM
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2572 W. State Rd. 426
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Suite 3024
Oviedo, FL 32765

(b) Neil A. Saydah
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

7250 Red Bug Lake Rd.
NEW Registered Office Address:
Suite 1012
Oviedo, FL 32765

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

Talon Duncan

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

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

2021 OCT 22 AM 9:59