

L2100010794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

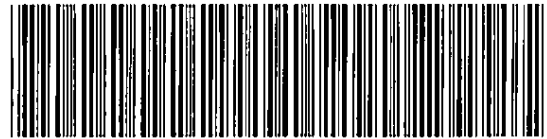
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
MAR 23 2023

Office Use Only



500400896795

01/20/23--01004--029 **25.00

SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

2023 JAN 20 PM 5:06

7-1-23

60

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunny Side Dreams, 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:

Leah Gillion

Name of Person

Sunny Side Dreams, LLC

Firm/Company

109 Ambersweet Way, PMB 731

Address

Davenport, FL 33897

City/State and Zip Code

sunnysidedreamsllc@gmail.com

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

For further information concerning this matter, please call:

Leah Gillion

954

300-2370

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

**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: Sunny Side Dreams, LLC
2. (a) Sunny Side Dreams c/o Leah Gillion
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
109 Ambersweet Way PMB 731
Davenport, FL 33897
- (b) Sunny Side Dreams c/o Leah Gillion
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
109 Ambersweet Way, PMB 731
Davenport, FL 33897
3. 01/17/2023 Date of filing/registration in Florida
4. L21000101794 Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
REGISTERED AGENTS INC.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
7901 4TH ST N STE 300
ST PETERSBURG, FL 33702
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Leah Gillion
NEW Registered Office Address:
109 Ambersweet Way, PMB 731
Davenport, FL 33897

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.

Leah Gillion
Signature of a member or authorized representative of a member

Leah Gillion
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.

Leah Gillion
Signature of Registered Agent

2023 JAN 20 PM 5:06
SECRETARY OF
TALLAHASSEE

FILED

20