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COVER LETTER

Division of Corporations			
SUBJECT: Dynamic Sights LLC Name of Limited Liab	ility Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee	e(s) are submitted for filing.		
Please return all correspondence concerning this matter to the fol	lowing:		
Kelly Ford Name of Person Dynamic Sights LLC Firm/Company			
Firm/Company			
1070 Fucqlyptus Drive, Unity) -		
Holly Mood, FC 33021 City/State and Zip Code			
E-mail address: (to be used for future annual report notifica	tion)		
For further information concerning this matter, please call:			
Kelly Ford at (305	1 450 - 8215 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.	Na	Name of the limited liability company: Dynamic Signis U	.16
2.	(a)	a) (b)	
_	(,	Principal office address of limited liability company: Mailing addres (Note: MUST BE STREET ADDRESS) (Note: MA)	ss of limited liability company: I BE POST OFFICE BOX APPLY Drive, Unit To 33021
		04/22/2021 1.7.100018	16902
3.		Date of filing/registration in Florida 4. Document	
5.	(a)	a) Kelly Ford	
	•	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
		Hollywood Ft In 33021	2021 SEC
		Holly word FT 33021	AFF B
		,	27
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
		1070 Euralyphis Drive Unit 4	M 9: 56
		NEW Registered Office Address:	iri.
		Hollywood Fr. 33521	
eha age wa the	inge int w s/we arti- ignat		ess office of the registered affirmed that the change(s) or as otherwise provided in Y. C. ped name of signee
pro the to i	ovisi obl nere ifiéc	reby accept the appointment as registered agent and agree to act in this capacity. I furtisions of all statutes relative to the proper and complete performance of my duties, and tobligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if erely reflect a change in the registered office address, I hereby confirm that the limited I field in writing of this change. [A Comparison of this change is a first agent agent as provided for in Chapter 605, F.S. Or, if a field in writing of this change is a first address. I hereby confirm that the limited I field in writing of this change.	I am Tamilian with and against