## 

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04/10/24--01011--018 \*\*25.00



## COVER LETTER .

TO: Registration Section Division of Corporations	
The Amazing Daigle LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Stephane Daigle	
Name of Person	<del></del>
The Amazing Daigle LLC	
Firm/Company	<del></del>
1945 W CR419 #1141	
Address	<del></del>
Oviedo, FL 32766	
City/State and Zip Code	
daigle6868@hotmail.fr	
E-mail address: (to be used for future annual re-	port notification)
For further information concerning this matter, please	e call:
Jake Neuman	407 644-5811
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 amou	int:
■ \$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.

I. Na	me of the limited liability company:  The Amazing Daig	le LLC	· 			<del></del>	
2. (a)	1945 W CR419 #1141, Oviedo FL 32766	1	b)	W CR419 #1141, Ovie	do FL 3276	6	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	<del>-</del> -		Mailing address of li (Note: MAY BE)	_	•	-
	5/13/21	-	L21000	0222553			
3.	Date of filing/registration in Florida Best Options LLC	4.		Document numb	oer		
5. (a)	Registered Agent and Registered Office shown on the records of the	ne Fłori		f State:			
	Registered Office Address (MUST BE FLORIDA STREET A 1145 Via Jardin	<u>DDKE.</u>	 ะภ				
	Palm Beach Gardens FL_	33418				202Կ	
(b)	Stephane Daigle			<del></del>		2024 APR 10	ا لا .
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office :	ddress:			P <u>.</u>	
	NEW Registered Office Address:				-: -:	2: 48	
	1945 W CR419 #1141				7:1 <sup>(1)</sup>	α	
	Oviedo FL_	32766					
change agent v was/we	imited liability company is not organized under the law for changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registe pility of the li	red office company, mited lia	e and the business of , it is hereby confirm bility company or as	fice of the i ed that the	register change	red :(s)
	iphic Lande	Ste	phane Da	<u> </u>			
I here provisi the obl to mero notified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I ha d in writing of this change.  The of Registered Agent	e to a perform for in ereby	ct in this nance of Chapter confirm t	Printed or typed na capacity. I further a my duties, and I am j 605, F.S. Or, if this hat the limited liabili	•		th the accept g filed een