## Lalocoationec

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
J. HODA		
J. HORNE JUL 29 2024		
3 2024		





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## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	
	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
William R. Heitz, Esq.	
Name of Person	<del></del>
HEITZ LAW FIRM PLLC	
Firm/Company	
2875 South Ocean Drive, Suite 200-19	
Address	
Palm Beach, Florida 33480	
City/State and Zip Code	
wheitz@heitzlaw.us	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	call:
Nathan Vander Wal, Esq. 5	585 272-7760
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 amoun	t:
■ \$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. N	ame of the limited liability company: DIMARCO CP.	LLC			
2. (a)	1950 BRIGHTON HENRIETTA TOWN LINE RD	(b)	1950 BRIGHTON HENRIETTA TOWN LINE RD		
(a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	ROCHESTER, NY 14623		ROCHESTER, NY 14623		
	06/14/2021	<u> </u>	21000276940		
3.	Date of filing/registration in Florida	<del>-</del> 4	Document number		
5 (a)	CORPORATION SERVICE COMPANY				
5. (a)	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	ept. of State;			
	Registered Office Address (MUST BE FLORIDA STREET	<del></del>			
	TALLAHASSEE, FI	32301 L			
(b)	JOHN L. DIMARCO, SR.				
\ <i>\</i>	Enter name of NEW Registered Agent and/or NEW Registered	d Office addre	<u></u>		
	4938 SANCTUARY LANE				
	NEW Registered Office Address:				
		<u>-</u>			
	BOCA RATON	L_33431	<u></u>		
change agent was/w the art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cles, of organization or the operating agreement of the	registered ability comp of the limite	office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in		
	William N. farth, Esq.	Wi	Minn R. 4Erz, Esq.		
_			Timed or typed name or signed		
provis the ob to m <del>er</del>	by accept the appointment as registered agent and agitions of all statutes relative to the proper and complete ligations of my position as registered agent as provide the reflect a change in the registered office address, I did writing of this change.	ree to act in performand ed for in Cha hereby conf	this capacity. I further agree to comply with the ze of my duties, and I am familiar with and accept upter 605, F.S. Or, if this document is being filed irm that the limited liability company has been		
<del></del>	are of Registered Agent				