## 

(Requesto	or's Name)
<del></del>	
(Address)	
(Address)	
(//00/033)	
(City/State	e/Zip/Phone #)
☐ SICK-NS	WAIT MAIL
(Business	Entity Name)
(Documer	nt Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:

Office Use Only





## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: SUGAY AND SDICE DE Name of Limited Lia	bility Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and for	ee(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	ollowing:
Staced Conte U Name of Person	_
Sugar and Spice Development Firm/Company	ts LLC
14255 Hampshile Bay Circ	Lê.
Winter Garden Fl. 34787 City/State and Zip Code	_
State 4 AM 1 1 1 Ed a mail. Com E-mail address: (to be used for future annual report notified	ation)
For further information concerning this matter, please call:	
Staney Conte at 904 Name of Person	) 51e3-3467 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 81247 Tallahassee, Fl. 32303
Enclosed is a check for the following amount:	निस् ५
∑ \$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.		me of the limited liability company: Dugar and Spice Developments LLC
2.	(a)	14255 Hampshile Bay Circle (b) 14255 Hampshile Bay CIV.
		Principal office address of limited liability(company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		Winter Garden, Fl. 34787 Winter Garden, Fl. 34787
		7/13/2021 L21000319360
3.		Date of filing/registration in Florida 4. Document number
5.	(a)	Martinez Law
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
		19:115 U.S. Huy 41 SUIR 600
		Registered Office Address (MUST/BE FLORIDA STREET ADDRESS)
		Lutz 11. 33549
	(b)	Staces Conte
		Enter name of NEW Registered Agent and/or NEW Registered Office address:
		14755 Hampshive Bay Cively.  NEW Registered Office Address:
		NEW Registered Office Address:
		P.F Indiana
		Wirther Garden . Fl. 3478)
If i	the li	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the
-ch	ange	or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
wa	ıs/we	re authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the	e arti	cles of organization or the operating agreement of the limited liability company.
	· · · · · · · · · · · · · · · · · · ·	The state of a member of a member State of a member State of a member Printed or typed name of signee
,	l	by account the appointment or registered agent and agree to act in this canacity. 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		
10	. OOI <b>mer</b> e tifio	ly reflect a change in the registered office address. I hereby confirm that the limited liability company has been I'm writing of this change.
no	ijiet	Stew Com H
Si	gnatu	Struf Con-U

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