

h21000499933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

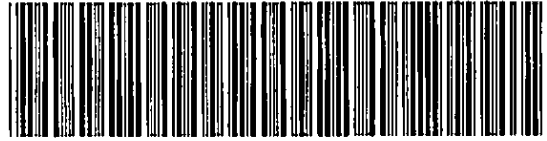
(Business Entity Name)

(Document Number)

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2023 JAN -5 AM 11:52
CLERK OF STATE
TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2022

BRENDA DOHRING HICKS
1110 N FLORIDA AVENUE, SUITE 110
TAMPA, FL 33602

SUBJECT: DOWNTOWN TAMPA LLC
Ref. Number: L21000499933

We have received your document for DOWNTOWN TAMPA LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please list the name and address for the new registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 822A00026403

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CLERK OF
TALLAHASSEE

2022 JAN -5 AM 11:24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Downtown Tampa 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:

Brenda J. Dohring Hicks
Name of Person

Downtown Tampa LLC
Firm/Company

1110 N. Florida Ave Suite 110
Address

Tampa FL 33602
City/State and Zip Code

Brenda@realwired.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samantha McGarrity at (813) 514.9593
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

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SECRETARY OF STATE
TALLAHASSEE, FL

FILED

**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: Downtown Tampa LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

1110 N. Florida Ave Suite 110 same
Tampa FL 33602

3. 1/31/2022 4. L21000499933
Date of filing/registration in Florida Document number

5. (a) Brenda J. Dohring Hicks
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1110 N. Florida Ave
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Suite 110
Tampa, FL 33602

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1110 N. Florida Ave
NEW Registered Office Address:
Suite 110
Tampa, FL 33602

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.

[Signature]
Signature of a member or authorized representative of a member

Brenda Dohring Hicks, CEO
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.

[Signature]
Signature of Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FL