L22000 192 788

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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COVER LETTER

TO:	Registration Section Division of Corporations		•		
SUBJI	D.Smart Marketing Solution	LLC			
00130		Name of Limited Liability Company			
Dear S	Sir or Madam:				
The en	nclosed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to	the following:		
Seba	stian Dill				
	Name of Person		- 		
MER	CATORZ LP				
	Firm/Company				
3250	NE 1st Ave STE 305				
	Address				
Miam	ii, FL 33137				
	City/State and Zip Code				
info@)mercatorzusa.com				
F	-mail address: (to be used for future ann	ual report r	otification)		
For fur	ther information concerning this matter.	please call	:		
Seba	stian Dill	786	435-0012		
• • • • •	Name of Person	··· \	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
	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. N	ame of the limited liability company: D.Smart Mar	keting Solution L	.LC		
2. (a)	3250 NE 1st Ave STE 305, Miami, FL 33137	(b) 3250 NE	(h) 3250 NE 1st Ave STE 305, Miami, FL 33137		
_	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
3.	04/22/2022 Date of filing/registration in Florida	<u>L220001</u>	92788 Document number		
J.	Christiane Naumann	٦.	120ctiment number		
5. (a	Registered Agent and Registered Office shown on the records o	t the Florida Dept. of St	 nte:		
	Registered Office Address		_		
	North Miami	_L _33161	_		
(b)	Enter name of NEW Registered Agent and/or NEW Registere		2022 OCT 20 PM 12: 10		
	NEW Registered Office Address:				
	7612 Pasa Dobles Ct				
	Tampa , Fl	L 33615			
the ch agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered offic iability company, it of the limited liabili e limited liability co	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in		
Signa	iture of a member or authorized representative of a member		Printed or typed name of signee		
provis the ob to mer	by accept the appointment as registered agent and agions 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 din scriting of this change.	ree to act in this cap e performance of my ed for in Chapter 60 hereby confirm that	pacity. I further agree to comply with the eduties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been		
Signate	ure of Registered Agent				