

L22 000 198836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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RA Change

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Dokou Designs 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:

Anna V Lewis

\_\_\_\_\_  
Name of Person

Dokou designs LLC

\_\_\_\_\_  
Firm/Company

P.O. Box 8994

\_\_\_\_\_  
Address

Naples FL 34101

\_\_\_\_\_  
City/State and Zip Code

OrganicVicky@yahoo.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anna V Lewis

239 777-4904  
at ( )

\_\_\_\_\_  
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

2022 JUN 21 AM 11:27

# 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: Dokou Designs LLC
2. (a) 1140 9th Ave N, Naples FL 34102  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
1140 9th Ave N  
Naples FL 34102
- (b) P.O.Box 8994, Naples FL 34101  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
P.O. Box 8994  
Naples FL 34101
3. 4/26/2022  
Date of filing/registration in Florida
4. L22000198836  
Document number
5. (a) Anna V Lewis  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
354 Dover Place, Apt 103, Naples FL 34104  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
354 Dover Place, Apt 103  
Naples, FL 34104
- (b) Anna V Lewis  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
1140 9th Ave N, Naples FL 34102  
**NEW Registered Office Address**:  
1140 9th Ave N  
Naples, FL 34102

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.

AVL  
Signature of a member or authorized representative of a member

Anna V Lewis

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.

AVL  
Signature of Registered Agent