## L22 000216703

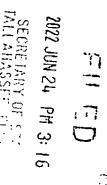
(Requestor's Name)						
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PICK-UP WAIT MAIL						
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Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
J. HORNE						
SEP 1 9 2022						

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## COVER LETTER

то:	Registration Section Division of Corporations	•	4				
SUBJI	DM CONNOR ESTATES LLC						
	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Office C	hange and fe	e(s) are submitted for filing.				
Please	return all correspondence concerning this ma	tter to the fol	lowing:				
Daniel	L Connor						
	Name of Person		-				
DM Co	onnor Estates LLC						
	Firm/Company		-				
2004 B	renham Ct						
	Address		-				
Orlande	o, FL						
	City/State and Zip Code		-				
goxluke	05@yahoo.com						
E	-mail address: (to be used for future annual re	port notifica	tion)				
For fur	ther information concerning this matter, pleas	se call:					
Daniel	L Connor at	828	8083329				
	Name of Person		Area Code & Daytime Telephone Number				
	Mailing Address:		Street Address:				
	Registration Section		Registration Section				
	Division of Corporations		Division of Corporations				
	P.O. Box 6327		The Centre of Tallahassee				
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amo	unt:					
	■ \$25 Filing Fee	<b>\$55</b>	□ \$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.

Na	ame of the limited liability company:	s LL	С		
(a)	2004 Brenham Ct		(b) 2004 Brenham Ct		
(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	<b>-</b>	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Orlando, FL		Orlando, l	FL.	
	32837	_	32837		
	05/09/2022		1.22000216	5703	
	Date of filing/registration in Florida	4.		Document number	
(a)	UNITED STATES CORPORATION AGENTS, INC.				
(4)	Registered Agent and Registered Office shown on the records of t 5575 S. SEMORAN BLVD.	te:			
(b)	Registered Office Address (MUST BE FLORIDA STREET A 36 ORLANDO, FL 32822	<del></del>			
		3282	2		
	Daniel L Connor			202 SE FAL	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			7	
	2004 Brenham Ct			2022 JUN 24 SEURETARY FALL MILASSE	
	NEW Registered Office Address:			of State	
	Orlando F1.	32831	7	- 16	
inge ent w s/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	regist bility f the imite	ered office an company, it i limited liabilit	nd the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.	
Signal	ure of a member or authorized representative of a member	_		Printed or typed name of signee	
ovisie obli mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	e to e perfor for i ereby	act in this cap mance of my n Chapter 603 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been	
7					
enatur	re of Registered Agent				