

L22000261553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

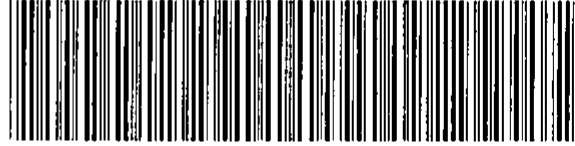
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 SEP 21 AM 9:46
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Done Dill 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:

Nigel Dillard

Name of Person

Done Dill LLC

Firm/Company

16573 SW 19th Street

Address

Miramar, FL 33027

City/State and Zip Code

ndillard@ymail.com

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

For further information concerning this matter, please call:

Nigel Dillard

Name of Person

at (305) 316-4044

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 15, 2023

NIGEL DILLARD
16573 SW 19TH STREET
MIRAMAR, FL 33027

SUBJECT: DONE DILL, LLC
Ref. Number: L22000261553

We have received your document for DONE DILL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 323A00018714

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.

Name of the limited liability company: Done Dill LLC

(a) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

16573 SW 19th Street
Miramar, FL 33027

(b) _____

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

29 NW 4th Ave
Dania, FL 33004

06/08/2022

Date of filing registration in Florida

L 22000261553

4.

Document number

(a) Inc Authority RA
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

390 North Orange Ave Ste 2300-N
Orlando, FL 32801

(b) Nigel Dillard
Enter name of NEW Registered Agent and/or NEW Registered Office address

NEW Registered Office Address

16573 SW 19th Street
Miramar, FL 33027

FILED
2023 SEP 21 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Nigel Dillard
Signature of a member or authorized representative of a member

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.

Nigel Dillard
Signature of Registered Agent