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COVER LETTER

TO: Registration Section Division of Corporations			
DIMARCO BRAINERD LLC SUBJECT:			
	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 n	natter to the following:		
William R. Heitz, Esq.			
Name of Person			
HEITZ LAW FIRM PLLC			
Firm/Company			
2875 South Ocean Drive, Suite 200-19			
Address			
Palm Beach, Florida 33480			
City/State and Zip Code			
wheitz@heitzław.us			
E-mail address: (to be used for future annual	l report notification)		
For further information concerning this matter, ple	ease call:		
Nathan Vander Wal, Esq.	585 272-7760 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 an	nount:		
■ \$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. Na	ime of the limited liability company: DIMARCO BRAI	NERI) L	LC 		<u> </u>
2. (a)	1950 BRIGHTON HENRIETTA TOWN LINE RD.		(b)	1950 BRIG	GHTON HENRI	ETTA TOWN LINE RD.
2. (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_			_	limited liability company:
	ROCHESTER, NY 14623	_		ROCHEST	ΓER, NY 14623	
	06/13/2022	_		L.220002699)46	
3. 5. (a)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.	-		Document num	iber
J. (d)	Registered Agent and Registered Office shown on the records of the 1201 HAYS STREET	he Flor	ida	Dept. of State	- ::	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	:SS)	<u> </u>	-	
	TALLAHASSEE, FL_	32301			-	2027
(b)	JOHN L. DIMARCO, SR.					1-1
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> (Office	add	<u>lress</u> :	-	- " - Co
	4938 SANCTUARY LANE					. 1
	NEW Registered Office Address:	<u> </u>			-	
	BOCA RATON . FL_	33431			-	
change agent v was/we the arti Signa I hered provisi	imited liability company is not organized under the law or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete programs of my position as registered agent as provided by reflect a change in the registered office address. I have	registo bility Tthe I imited ee to a perfor for in	ereccon imi d li	d office and npany, it is ited liability com white com white com in this capanice of my a hapter 605.	I the business of thereby confirm or as a spany. Printed or typed or a specific type of the specific type of the specific things. The specific things of the sp	office of the registered ned that the change(s) is otherwise provided in the change of signee agree to comply with the familiar with and accept is document is being filed.
notified	t infwrying of this change. re of Registered Agent	•				