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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE DALYONS DEN LLC

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July 0.7 2023

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To: 18506176383

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	one of the limited liability company: DA LYONS E	EN LI	_C	··			
2. (a)	Principal office address of limited liability company:		(b)	Mailing address of	limited lial	bility co	ompany:
		(<u>Note: MUST BE STREET ADDRESS</u>)			(<u>Note: MAY BI</u>	E POST OF	FFICE	BOX)
2		06/24/2022 Date of filing/registration in Florida			000286205			
3.		Date of ming/registration in Florida	4.		Document nur	nber		
5. (a)	ZENBUSINESS INC.	·····					
		Registered Agent and Registered Office shown on the records of	the Flori	da Depi, o	of State:			
		336 E. COLLEGE AVE.						
		Registered Office Address <u>(MUST BE FLORIDA STREET A</u>	ADDRES	<u>(S)</u>				
		SUITE 301						
		TALLAHASSEE FL	<u>3230</u>	1				
(b)	•	Registered Agents Inc			2823 JUL - 7	•••		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:		注册		7
		7901 4th St N						PROVED AND AND
		NEW Registered Office Address:					골) (E)
		STE 300				1087 1087 1087 1087 1087 1087 1087 1087	ن زن	_
		St. Petersburg , FL	3370)2		-4 157	~4	
the c agen was/ the a	hai tw we rtic	mited liability company is not organized under the lawinge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liar re authorized by an affirmative vote of the members of less of organization or the operating agreement of the	the reg ability of af the lia	istered o company mited lia	office and the busine /, it is hereby confir ability company or a	ess office med that (of the the ch	registered ange(s)
<u> 12</u>	<u>(</u> 1	ure of a member or authorized representative of a member			Robin Jo			
					Printed or typed i	_	•	
I he prov the o to me notif	reb isio bli ere ied	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have ting of this change.	ce to at perform I for in tereby (ct in this nance of Chapter confirm	s capacity. I further f my dutics, and I an r 605, F.S. Or, if thi that the limited liab	agree to 1 familiar is docume ility comp	comp with ent is pany h	ly with the and accept being filed as been
مار کے	ψd	David Roberts - Assistant Secretary	у					
Sign	atur	e of Registered Agent						