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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 : (855)330-1010

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

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LLC REGISTERED AGENT CHANGE DONEBYNELLY, LLC

| Certificate of Status | 0 |
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| Certified Copy | 0 |
| Page Count | 02 |
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-APR-17 2023

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Help

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. N | ame of the limited liability company: DoneByN | velly | , LLC | | | _ |
|-------------------------------------|---|-------------------------------|--|--|---------------------------------------|---|
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | | | _ |
| | 3510 NW 34TH STREET | 3510 NW 34TH STREET | | | | - |
| | GAINESVILLE, FL 32605 | | GAINES' | VILLE, FL 32605 | | _ |
| | 08/10/22 | | L2200 | 0353139 | | |
| 3. | Date of filing/registration in Florida | 4. | | Document number | | |
| 5. (a | INC AUTHORITY RA | | | | | |
| | Registered Agent and Registered Office shown on the records of | the Flori | da Dept, of State | : | | |
| (b) | Registered Office Address (MUST BE FLORIDA STREET) 390 NORTH ORANGE AVE., STE 2300-N ORLANDO . FI Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered 7901 4th St N | . 328 | 01 | | SI CHEFARY OF STAIR | |
| | NEW Registered Office Address: STE 300 | | | | | |
| | St. Petersburg | 3370 |)2 | | | |
| the ch agent was/w the art | limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the | the repability of the limited | gistered office company, it is imited liability I liability com | and the business offic hereby confirmed that company or as other | ce of the registered at the change(s) | d |

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 natified in writing of this change.

David Roberts - Assistant Secretary

Printed or typed name of signee

David Roberts - Assistant Secretary

Signature of Registered Agent

Signature of a member or authorized representative of a member