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Certified Copies	Certificates of	Status			
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Special Instructions to	Filing Officer.				

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SECLE FACY OF STATE
TAIL ANASSEE, FL



COVER LETTER

TO: Registration Section Division of Corporations	<i>:</i>	·	
DIRECT TECH SERVICE SUBJECT:	S, LLC		
	Name of Limited	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Regist	ered Office Change an	d fee(s) are submitted for filing.	
Please return all correspondence conce	erning this matter to the	e following:	
Luis Carvajal		202	
Name of Person	on	ALLA	es es
Firm/Compan	у	2024 JAN 22 AM II: 45 SECONDANY OF STATE TALLAHASSEE, FL	0
105 137TH STREET NE		E.F.	,
Address			
BRADENTON, FL 34212			
City/State and Zip	Code		
luchito-112233@hotmail.com			
E-mail address: (to be used for fi	uture annual report not	fication)	
For further information concerning thi	s matter, please call:		
Luis Carvajal	239 at (420 4818	
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 fo	ollowing amount:		
■ \$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.

. Na	ame of the limited liability company: DIRECT TECH S DIRECT TECH S DIRECT TECH S		ICE.		U CODECT NE DO ADENTO	N ET 24212
(a)	105 137TH STREET NE BRADENTON, FL 34212	_	(b)	H STREET NE BRADENTO	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_			Mailing address of limited liabili (Note: MAY BE POST OFF)	
	03/27/2023	_	_	L230001540	005	
	Date of filing/registration in Florida	4.			Document number	
(a)	INC AUTHORITY RA				수 2 	202L
(ω)	Registered Agent and Registered Office shown on the records of	the Flo	orida	Dept. of State	ALLAH ALLAH	PORTL IAN 22
	Registered Office Address <u>MUST BE FLORIDA STREET</u>	<u>ADDR</u>	ESS	<u> </u>	AS	> M
	390 NORTH ORANGE AVE., STE 2300-N				ZED S	
	ORLANDO , FL	3280	1		FL	M = 1:45
(b)	Luis Carvajal Enter name of NEW Registered Agent and/or NEW Registered	Office	e ada		-	
	105 137TH STREET NE	Oliv		<u>11 C.3.3</u> .		
	NEW Registered Office Address:				-	
	BRADENTON, FL	3421	2		-	
inge int v s/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	regist bility of the	tere cor limi	d office and npany, it is ited liability	d the business office of the hereby confirmed that the y company or as otherwise	registered change(s)
		L	Luis	Carvajal		
ignat	ture of member or authorized representative of a member	_			Printed or typed name of signed	!
ovisi obli nere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this chapte.	ee to perfo d for i vereby	act rma in C v co	in this capa nce of my d hapter 605, nfirm that ti	ncity. I further agree to con luties, and I am familiar wi . F.S. Or, if this document the limited liability compan	nply with the th and accep is being filed y has been
	6 W					
ignatu	re of Registered Agent					