Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000032507 3)))



H2500003250734BC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

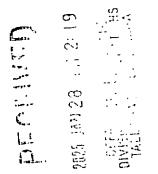
Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)389-0502

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

Email	Address:		



## LLC REGISTERED AGENT CHANGE DDT INDUSTRIES LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu K. SALY

Help

JAN 2 9 2025

To:

## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: DDT INDUSTRIE	ES LLC					
	ne of Limited L	iability Company				
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.				
Please return all correspondence concerning th	is matter to the	following:				
Erik Treutlein						
Name of Person		<del></del>				
Legalzoom.com, Inc.						
Firm/Company		<del>_</del>				
9900 Spectrum Dr						
Address		<del></del>				
Austin, TX 78717						
City/State and Zip Code		arabe**U				
dan.tanury@gmail.com						
E-mail address: (to be used for future ann	ual report noti	tication)				
For further information concerning this matter.	please call:					
Erik Treutlein	800 at (	773-0888 ext 9724				
Name of Person	· ·	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314				
Enclosed is a check for the following	Enclosed is a check for the following amount:					
□ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy				
INHS18 (2/14)						

To:

## 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:	DUS'	TRIES	LLC	
2. (a)			(b)		
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	11422 Misty Isle Ln		11422 N	listy Isle Ln	
	Riverview, FL 33579		Riverview, FL 33579		
	05/11/2023		L230002	34006	
3.	Date of filing/registration in Florida	— 4.		Document number	
5. (a)					
<i>D</i> , (11,	Registered Agent and Registered Office shown on the records o	f the Flori	da Dept. of State		
	LegalZoom				
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRE,	SS)	是 五	
	11422 Misty Isle Ln			285 JAN 28	
	Riverview	L 3357	9		
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office a	ddress:	7 5: 08	
	UNITED STATES CORPORATION AGEN			<u></u>	
	NEW Registered Office Address:			-	
	476 Riverside Ave.				
	Jacksonville F	L_3220	2		
the cha agent v was/wa	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the reginability of the li	gistered office company, it is mited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in	
/S/ D	aniel Tanury	Da	aniel Tanur	у	
Signa	ture of a member or authorized representative of a member	-		Printed or typed name of signee	
provisi the obli to meri notified	by accept the appointment as registered agent and actions of all statutes relative to the proper and completifications of my position as registered agent as providely reflect a change in the registered office address, I din writing of this change.  Brik Troutlein, ASSISTANT SECRETARY	e perfori ed for in hereby	nance of my i Chapter 605 confirm that	duties, and I am familiar with and accept—	
	re of Registered Agent	, oarred	STATES		