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## **COVER LETTER**

TO:	Registration Section Division of Corporations							
SUBJE	Dynamic Digges or Florida LLC							
., 61,412		Name of Limited Liability Company						
Dear Si	r or Madam:							
The end	losed Registered Agent/Registered C	ffice Change a	nd fee(s) are submitted for filing.					
Please r	eturn all correspondence concerning	this matter to the	he following:					
Xavier I	larmon							
	Name of Person							
Dynami	c Diggers of Florida LLC							
	Firm/Company		<del></del>					
9059 Ad	gean Cir							
	Address		<del></del>					
Lehigh .	Acres/Florida, 33936							
	City/State and Zip Code		<del></del>					
DYNA	MICDIGGERSOFFL@gmail.com							
E-	mail address: (to be used for future a	nnual report no	otification)					
For furt	her information concerning this matte	er, please call:						
Xavier I	Harmon	786 at (	205 2424					
	Name of Person	u: \	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	ng amount:						
	■ \$25 Filing Fee	٥	\$55 Filing Fee & Certified Copy					
INHS18	(2/14)							

## 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.

	ame of the limited liability company:  Dynamic Diggers of 9059 Aegean Cir Lehigh Acres FL. 33936		(b) 9059 Aegean Cir Lehigh Acres FL. 33936					
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)				
	6/09/2023	<del></del>	1.23000279	2620			· · · · · · · · · · · · · · · · · · ·	
S.	Date of filing/registration in Florida	— 4.		Document numbe	 r			
	Xavier Harmon			To Common Harmy	•			
5. (a)	Registered Agent and Registered Office shown on the records of	f the Florid	a Dept. of Sta	nte:				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES.	<u>s)</u>	_	S. S.	202		
	9059 Aegean Cir Lehigh Acres				CRE ALI	3	71	
	, Fl	33936 L				2023 JUN 23		
(b)	MGRM Xavier Harmon			_	TARY OF		m	
. ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office ad	ldress:		STATE E. FL	PH 4: 36	O	
	NEW Registered Office Address:			_				
	9059 Aegean Cir Lehigh Acres			_				
	. F	. 33936 L		•				
change agent v was/wo the arti	imited liability company is not organized under the la for changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li- cre authorized by an affirmative vote of the members cles of organization or the operating agreement of the will Hernau	e register iability co of the lin : limited	ed office ar impany, it nited liabili	nd the business officis hereby confirmed ity company or as of mpany.	ce of the I that the	registe chang	ered e(s)	
	ture of a member or authorized representative of a member	-		Printed or typed nam	e of signe	e e		
provisi the obl to mere	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I I in writing of this change.	ree to act perform ed for in C hereby c	in this cap ance of my Chapter 60 onfirm that	pacity. I further agg duties, and I am fa 15, F.S. Or, if this d t the limited liability	ree to co miliar w ocument : compai	mply w ith and is bein ny has	rith the l accept ng filed heen	