L23000363885

(Requestor's Name)							
(Address)							
(1.651.655)							
(Address)							
(City/State/Zip/Phone #)							
(5.1),5.15.52.57							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Dusiness Littly Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer.							
<u> </u>							

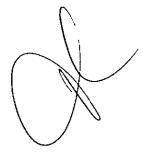
Office Use Only



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10/03/24--01015--011 **2485.00







October 18, 2024

WALTER THOMAS 2549 RYLAND FALLS DRIVE LAKELAND, FL 33811

SUBJECT: DOHERTY HOLDINGS FORTY SEVENTH, LLC

Ref. Number: L23000363885

We have received your document for DOHERTY HOLDINGS FORTY SEVENTH, LLC and your check(s) totaling \$2485.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please calls (850) 245-6050.

Wanite A Mills Regulatory Specialist II

Letter Number: 024A00023072

COVER LETTER

TO:	Registration Section Division of Corporations									
ÇI:DI	DOHERTY HOLDINGS FORT	TY SEVENTH, LLC								
SUDI	r.c.i.	Name of Limited	Liability Company							
Dear :	Sir or Madam:									
The e	nclosed Registered Agent/Registered	Office Change an	d fee(s) are submitted for filing.							
Please	e return all correspondence concernir	ng this matter to the	e following:							
Walte	r Thomas									
	Name of Person									
Walte	r Thomas, P.A.									
	Firm/Company									
2549	Ryland Falls Srive									
	Address									
Lakel	and, Florida 33811			Ž.	2024 NOV -5					
	City/State and Zip Co	de		<u> </u>	- A0	42231				
walter	@walterthomaspa.com			AHASSEE.		المحادث والمحادث				
	E-mail address: (to be used for future	e annual report noti	ification)	SEE.	PH					
For fu	orther information concerning this ma	itter, please call:			သ <u>.</u> အ					
Walte	r Thomas	863 at (940-4855	· 						
	Name of Person		Area Code & Daytime Telephone l	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 8 Tallahassee, FL 32303	10						
	Enclosed is a check for the follow	ving amount:								
	■ \$25 Filing Fee		☐ \$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.

l. Na	ane of the limited liability company: DOHERTY HOL	DOHERTY HOLDINGS FORTY SEVENTH, LLC					
2. (a)	2925 MALL HILL DR		2925 MALL HILL DR				
(<i>a</i>)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) LAKELAND, FL 33810		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) LAKELAND, FL 33810				
	LANDIAND, II. 55610	_					
	08/02/2023	_	L230003638	885			
	Date of filing/registration in Florida	4.		Document number			
()	WALTER THOMAS, P.A.						
5. (a)	Registered Agent and Registered Office shown on the records of 230 Doris Drive	the Florida	Dept. of State	u			
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS.	!	2024 NOV -			
	Lakeland , FI	33813		OV V			
	WALTER THOMAS, P.A.	V-5 PM 3 AHASSEL					
	Enter name of NEW Registered Agent and/or NEW Registered						
	2549 Ryland Falls Drive			A) (
	NEW Registered Office Address:						
	Lakeland	33811					
	, г.	·					
hange gent v vas/we	imited liability company is not organized under the lay or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	registere ability con of the limi limited li	d office and npany, it is ted liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.			
Sienai	ture of a member or authorized expresentative of a member		Mopher Done	Printed or typed name of signee			
I herei provisi he obl o mere totifiec	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 providedly reflect a change in the registered office address, I have been the control of this change.	performa 1 för in C	nce of my d hapter 605,	luties, and I am familiar with and accept F.S. Or, if this document is being filed			