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TALLAHASSEE, FL

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Registration Section

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IS18 (2/14)

Division of Corporations				
BJECT: DOFFStarmarketing LLC Name of Limited Liability Company				
ar Sir or Madam:				
e enclosed Registered Agent/Registered Office Change and f	fee(s) are submitted for filing.			
ase return all correspondence concerning this matter to the fo	ollowing:			
Tammy Dorfman				
Name of Person	-			
DorfstarMarketing LL	C			
Firm/Company				
725 N. Crescent Drive				
Address	_			
Hollywood, FL 33021	SECRETARY OF STAT TALLAHASSEE, FL			
City/State and Zip Code	NOV TI			
Horan-pa@yahoo.com	18 18 1ASS			
E-mail address: (to be used for future annual report notific	zation)			
further information concerning this matter, please call:				
Tammy Dorkman at 954	801-3358			
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 following amount:				
\$25 Filing Fee \$5:	5 Filing Fee & Certified Copy			

TATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

ursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company bmits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Na	une of the limited liability company:	arketing LLC
(a)	Tammy Doffman (b) Ta	mmy Dorfman
()	Principal office address of limited liability company:	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)
	725 N. Crescopt Drive 72	15 N.Crescent Driv
	Hollywood, FL 33021 Ho	ollywood, FL 33021
	915/23 L	23000414989
	Date of filing/registration in Florida 4.	Document number
(a)	INC guthority RA	
(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State	 e:
	INC Authority RA	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	_
	390 Morth orange Ave Ste 2300) – N
	Orlando ,FL 32801	-
(b)	Tammy Dorfman	FIL. 2024 NOV 18 SECRETARY TALLAHA
, ,	Enter name of NEW Registered Agent and/or NEW Registered Office address:	HARY 18
	725 N. Crescent Drive	FILED 2024 NOV 18 AM 9: SECRETARY OF ST TALLAHASSEE, F
	NEW Registered Office Address:	9: 21 FL FL
	Hollwood FL 33021	-
	, FL	_
inge int v	mited liability company is not organized under the laws of the State of Floor changes are made, the Florida street address of the registered office and will be identical. Or, in the case of a Florida limited liability company, it is	d the business office of the registered shereby confirmed that the change(s)
arti	ere authorized by an affirmative vote of the members of the limited liability cles of organization or the operating agreement of the limited liability com	y company or as otherwise provided in ipany.
	cles of organization or the operating agreement of the limited liability com	Printed or typed name of signee
ignat	ure of a member or authorized representative of a member	Printed or typed name of signee
visio obli	by accept the appointment as registered agent and agree to act in this cape on sof all statutes relative to the proper and complete performance of my of igations of my position as registered agent as provided for in Chapter 605, ly reflect a change in the registered office address, I hereby confirm that it is misting of this change.	acity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

gnature of Registered Agent