L24000124000

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone #	f)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates o	f Status		
Special Instructions to Filing Officer:				
	J. HOR	NE 1 2024		





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GOVER LETTER

	ration Section on of Corporations					
I SUBJECT:	Da Mission LLC					
SUBJECT: _	Name of Limited Liability Company					
Dear Sir or Ma	adam:					
The enclosed l	Registered Agent/Registered O	ffice Change a	nd fee(s) are submitted for filing.			
Please return a	all correspondence concerning t	his matter to th	ne following:			
Tierra W						
	Name of Person					
Zenbusiness in	e					
	Firm/Company					
5511 parkerest	drive, ste 103					
	Address					
Austin, TX 787	731					
	City/State and Zip Code	-, -				
ra@zenbusines						
E-mail a	ddress: (to be used for future a	nnual report no	tification)			
For further int	formation concerning this matte	er, please call:				
Tierra W		8 44 at (493-6249			
	Name of Person		Area Code & Daytime Telephone Number			
Regis Divis P.O.	ing Address: stration Section ion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclo	osed is a check for the following	ng amount:				
\$2 :	5 Filing Fee	ت	\$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.

(a)	une of the limited liability company: 105 TURPIAL WAY	() (c	105 TURPIAL WAY
(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)
	MELBOURNE, FL 32901	_		MELBOURNE, FL 32901
	03/12/2024	_	1.24	24000124060
(a)	Date of filing/registration in Florida DeAmez Ross	4.		Document number
(a)	Registered Agent and Registered Office shown on the records of t 105 TURPIAL WAY	he Florid	a Dep	ept. of State:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>s)</u>	
	MELBOURNE , FL	32901		2024
(b)	ZenBusiness Inc.		<u> </u>	2024 JUN - 3 PAIR
•	Enter name of NEW Registered Agent and/or NEW Registered	Office a	idres	ess:
	336 E. College Ave. Suite 301			
	NEW Registered Office Address:			<u></u>
	Tallahassee, FL	32301		
ange ent v	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	register bility c f the lir	ed o ompa nited	office and the business office of the registered pany, it is hereby confirmed that the change(seed liability company or as otherwise provided
S/ Da	eAmez Ross			Printed or typed name of signee
here ovisi e obi mer	ture of a member or authorized representative of a member by accept the appointment as registered agent and agra ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h d if writing of this change.	perjorn Leonia	ance Cha	this capacity. I further agree to comply with ce of my duties, and I am familiar with and ac