

M17 000009497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

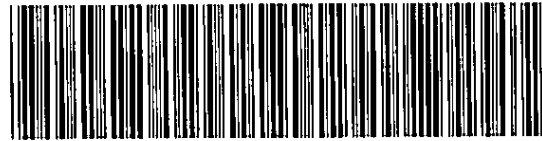
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AND  
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2019 APR 29 PM 4:25  
CLERK OF COURT  
CLERK OF COURT

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MAY 08 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DNP Property Solutions, LLC.

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paula Yoculan

Name of Person

DNP Property Solutions, LLC.

Firm/Company

1075 E. Gaucho Cir.

Address

Deltona, FL 32725

City/State and Zip Code

info@DNPPROPERTYSOLUTIONS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paula Yoculan

at ( 386 ) 878-6350

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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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TALLAHASSEE, FLORIDA

**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. Name of the limited liability company: DNP Property Solutions, LLC.

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

1075 E. Gaucho Cir.

1075 E. Gaucho Cir.

Deltona, FL 32725

Deltona, FL 32725

11/03/2017

M17000009497

3. Date of filing/registration in Florida 4. Document number

5. (a) Paula Yoculan  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Paula Yoculan

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3030 N. ROCKY POINT DR., STE 150A

TAMPA, FL 33607

(b) \_\_\_\_\_  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Paula Yoculan

NEW Registered Office Address:

1075 E. Gaucho Cir.

Deltona, FL 32725

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Paula Yoculan  
Signature of a member or authorized representative of a member

Paula Yoculan  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Paula Yoculan  
Signature of Registered Agent

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

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AND  
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2019 APR 29 PM 4:25  
CLERK OF THE CIRCUIT COURT  
IN AND FOR THE COUNTY OF ALBANY, FLORIDA