

L12000154218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

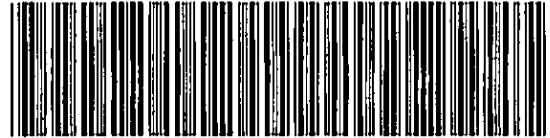
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700364358197

04/21/21--01015--015 **25.00

2021 APR 21 PM 4: 10
TALLAHASSEE, FLORIDA
STATE

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1830 SOUTH OCEAN DRIVE 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:

JOSEPH L. MOREA
Name of Person

Firm/Company

400 OCEAN ROAD, APT # 185
Address

VERO BEACH, FLORIDA 32963
City/State and Zip Code

JOE.L.MOREA@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH L. MOREA at (631) 697-6925
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

\$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.

1. Name of the limited liability company: 1830 SOUTH OCEAN DRIVE 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**)

400 OCEAN ROAD, APT # 185
VERO BEACH, FLORIDA 32963

400 OCEAN ROAD, APT. # 185
VERO BEACH, FLORIDA 32963

3. 12/10/2012 4. L12000154218
 Date of filing/registration in Florida Document number

5. (a) DANIEL J. PROBST, ESQ.
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)
3300 PGA BLVD, SUITE 500
PALM BEACH GARDENS, FL 33410

DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA
 2021 APR 21 PM 4:10
 FILED

(b) JOSEPH L. MOREA
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Joseph L. Morea
NEW Registered Office Address:
400 OCEAN ROAD, APT. # 185
VERO BEACH, FL 32963

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.

Dorothy Morea Signature of a member or authorized representative of a member
Dorothy Morea Printed or typed name of signer

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.

Joseph L. Morea
 Signature of Registered Agent