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SECRETARY OF STATE TALLAHASSEE FLORIDA

OCT 23 2014 T. CARTER

RATRO change

## **COVER LETTER**

TO: Amendment Section Division of Corporations								
SUBJECT: Dalco New River Manager, Inc								
Name of Corporation								
DOCUMENT NUMBER: P060000301801								
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.								
Please return all correspondence concerning this matter to the following:								
The state of the s								
Jerry Fadgen, CPA								
Name of Contact Person								
Jerry Fadgen & Co								
Firm/Company								
21 East Acre Drive								
Address								
Plantation, FL 33317								
City/State and Zip Code								
jerryfad@aol.com								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
Jerry Fadgen Name of Contact Person  at (954 ) 584 9786 Area Code & Daytime Telephone Number								
Name of Contact Person Area Code & Daytime Telephone Number								
Enclosed is a \$35.00 check made payable to the Department of State.								
Mailing Address: Amendment Section  Street Address: Amendment Section								

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607. nge is submitted for a corp r to change its registered o	poration organi	ized under the laws of th	e State of	FLOR	RIDA	
1 The name of t	he corporation: Dalco N	New River I	Manager, Inc				
2. The principal	office address: 21 East	t Acre Drive	e, Plantation, FL	33317			
						<del></del>	
3. The mailing a	ddress (if different): P	O Box 489,	, Fort Lauderdale,	FL 33	302	<u> </u>	
4. Date of incorp	poration/qualification: 02	/28/2006	Document number	P0600	003	0181	
5. The name and	street address of the curre tment of State: (If resigned	ent registered ag		e on file w	ith the	;	
	RESIGNED						
							ΤΑS
						30 1	ECR LLA
		. ,=	<u> </u>		ı	=	HAS
6. The name and (if changed):	street address of the new	registered agen	t (if changed) and /or re	gistered of	fice	4 OCT 10 PM	RY OF SEE, F
	Jerry Fadge	n, CPA				•••	STA:
	21 East Acre	e Drive				0	
	<del></del>	P.O. Box NOT	acc <del>e</del> ptable		•		
	Plantation, I	FL 33317					
The street address changed will	ess of its registered office be identical.	and the street a	address of the business	office of it	ts regis	stered	agent,
Such change wa authorized by th	s authorized by resolution be board, or the corporation	n duly adopted on has been not	by its board of director ified in writing of the cl	s or by an hange.	office	r so	
d.A	Junes		Lawrence Dup			or	
I hereby accept I further agree i performance of agent. Or. if th	te of an officer or director the appointment as regist to comply with the provisi my duties, and I am famil is document is being filed that the corporation has b	tered agent and ions of all statu iar with and ac merely to refle been notified in	Printed or types I agree to act in this cap ites relative to the prope ccept the obligation of n ect a change in the regis writing of this change.	pacity, er and con ny position dered offic		egister Iress, I	yed
	129 _	•	09/24/2014				
- J. Sp.	nature of Registered Agent	<del> </del>	Da	te			<del></del>
If signing on be	half of an entity:						
RRY FADO		100 h					
T	med or Printed Name						

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*