840719

(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;





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2019 JAN -2 PH 5: 33
SECRETARY OF STATE

R. WHITE 333

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

statement of che	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of Delaware	
	ler to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Spanish Wells Properties, Ltd.	
2. The principal	al office address: 23150 Fashion Drive #235, Estero, FL 33928	
3. The mailing	address (if different):	
4. Date of incor	prporation/qualification: 12/28/1994 Document number: 840719	
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Ned E Dewhirst	
	24880 Burnt Pine Drive, Bldg. 8	
	Bonita Springs, FL 34134	T I
6. The name and (if changed):	Ned E Dewhirst 24880 Burnt Pine Drive, Bldg. 8 Bonita Springs, FL 34134 and street address of the new registered agent (if changed) and /or registered office Ned E Dewhirst	เ
	Ned E Dewhirst	3
	23150 Fashion Drive #235	
	P.O. Box NOT acceptable	
	Estero, FL 33928	
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, ll be identical.	
	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
	Rodney A. Welty, Corporate Secretary	
I hereby accept I further agree performance of agent. Or, if th	the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I at the corporation has been notified in writing of this change.	
	gnature of Registered Agent Date	
ii signing on be	chalf of an entity:	
Т	Typed or Printed Name	
	* * * FILING FEE: \$35.00 * * *	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 (03/12)