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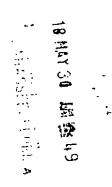
(Requestor's Name)
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PICK-UP WAIT MAIL
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JUN 0 1 2018

COVER LETTER

•							
TO: Registration Section Division of Corporations							
S. W. FLORIDA COMMERCIAL GE	ROUP, LLC						
	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	to the following:						
Cesar A. Osorio							
Name of Person							
S. W. FLORIDA COMMERCIAL GROUP, LLC							
Firm/Company							
1145 Golden Cane Dr							
Address							
Weston, FL, 33327							
City/State and Zip Code							
kwinvest@aol.com							
E-mail address: (to be used for future annual report	t notification)						
For further information concerning this matter, please c	all:						
Cesar A. Osorio	05 725-7305						
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						

INHS18 (2/14)

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. Na	ame of the limited liability company: S. W. FLOF	RIDA C	ОМ	MERCIA	AL GROUP, L	LC		
2. (a)	1145 Golden Cane Dr, Weston, FL, 33327		(b)	1145 G	olden Cane D	r, West	on, FL	, 33327
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)	N	Mailing address of 1 (Note: MAY BE			-
	1145 Golden Cane Dr, Weston, FL, 33327	7	-	1145 Go	olden Cane D	r, Westo	on, FL	, 33327
	12/20/2005		L	.0500012	21843			
3.	Date of filing/registration in Florida	4.	_		Document num	ber	<u>.</u>	
5. (a)	Registered Agents Inc.							
5. (a)	Registered Agent and Registered Office shown on the records	of the Flo	rida E	Pept, of State	- 2:			
	3030 N. Rocky Point Dr. SUITE 150A Tan	npa, Fl	. 33	607				
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRI	ESS)	•	-	p# 1 4	<u></u>	
	3030 N. Rocky Point Dr. SUITE 150					 	8 HAY	
	Tampa1	FL_3366)7		-	77 77 70	<u>ار</u> ن	
(b)	Cesar A. Osorio					177 177 127	更	:
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office	addr	<u>uss</u> :		Ŗ.	¥; 19	
	1145 Golden Cane Dr					5	Œ	
	NEW Registered Office Address:				•			
				1-1-1	-			
	Weston	_{FL} 333	27		_			
the cha agent w was/wo	imited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members of organization or the operating agreement of the	of the re liability s of the he limite	egiste con limit ed lia	ered office pany, it is ed liability bility com	e and the busines is hereby confirm y company or as inpany	ss office oned that the	of the re he chan	egistered ge(s)
<u> </u>	celecule. Des Generalitée of a member ture of a member or authorized representative of a member	<u> </u>	ola!	nda de C				
				.1.	Printed or typed n	-		
provisi the obl to mere notified	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as providely reflect a change in the registered office address, d in writing of this change.	igree to He perfo ded for i I hereb	act i. rmar n Ch y con	n this capa ace of my a apter 605 firm that i	acity. I further of duties, and I am . F.S. Or, if this the limited liabi	agree to c Jamiliar s docume lity comp	comply with an nt is be any has	with the id accept ing filed : been

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

Signature of Registered Agent