## 10800058304

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JUN 20 2016

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: 6/0/5W Name of Lim	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
GERALD ROWLEY Name of Person	
6/0/SW LLC Firm/Company	
4781 N. Congress	Ave, ste 217
Buynton Beach, FLON City/State and Zip Code	<u>u'd</u> 33426
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please ca	II:
GERALD Rowley at (9)	54 296-2559 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. Name of the limited liability company: 6/0/5W LLC
2. (a) 478/ N. COWGREST AVE. #217
Principal office address of limited liability company:  Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)
BOYNTON Bett, FL. 33426 4781 N. Congress Ave
BoyNton BCH, FC-334
April 24, 2018 L08000058304
3. Date of filing/registration in Florida 4. Document number
5. (a) <u>GENOUEVA</u> GONZALRT
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
BOLNTON BOH 1 33426
BOUNTON BCH, 1 .FL 33426 : 3
DOGN LON DON, 1 IFL 55 LOS
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
enter name of NEW Registered Agent and/or NEW Registered Office address:
GERALD Rowley 5
NEW Registered Office Address:
, FL
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.
Signature of a member of authorized representative of a member 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 marely reflect a change in the registered office address, I hereby confirm that the limited liability company has been
to marely reflect a change in the registered office address, I hereby confirm that the limited flability company has been notified in writing of this change.
Signature of Registered Agent
Signature of regionered rigent

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