L09000059987

(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
(
Certified Copies Certificates of Status						
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COVER LETTER

	gistration Section vision of Corporations		•				
SUBJECT	DAYSON LLC -		·				
		Name of Limited Liability Company					
Dear Sir or	r Madam:						
The enclos	sed Registered Agent/Registered (Office Change and	fee(s) are submitted for filing.				
Please retu	irn all correspondence concerning	this matter to the f	ollowing:				
John Murph	ny						
	Name of Person		_				
DAYSON I	LLC						
	Firm/Company		_				
477 S ROSI	EMARY AVE STE 219						
	Address		***				
WEST PAI	LM BEACH, FL 33401						
	City/State and Zip Cod	2					
accounting	@apparelmagic.com						
E-ma	ail address: (to be used for future a	annual report notifi	cation)				
For further	information concerning this matt	er, please call:					
Brandon Gi	insherg	561 at (506-5557				
	Name of Person	(Area Code & Daytime Telephone Number				
Ro Di P.	ailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
En	nclosed is a check for the followi	ng amount:					
	\$25 Filing Fee	ee					

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.

l. Na	ume of the limited liability company: DAYSON LLC	;					
2. (a)	477 S ROSEMARY AVE		477 S RC	DSEMARY AVE	. <u></u>		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(D)		dailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	STE 219		STE 219				
	WEST PALM BEACH, FL 33401		WEST PA	ALM BEACH, FL 33	401		
	06/19/2009		L09000059	9987			
3.5. (a)	Date of filing/registration in Florida MURPHY, JOHN	4.		Document numbe	r		
()	Registered Agent and Registered Office shown on the records	of the Florid	a Dept. of Sta	nte:			
	777 South Flagler Drive				202 SE		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_	2021 DEC SECRETALLA	77	
	Suite 800W				C 2	Summ en am	
	WEST PALM BEACH, I	FL 33401		_	I AF	7	
(b)	MURPHY, JOHN				NH 9: 13		
	Enter name of NEW Registered Agent and/or NEW Register	ed Office ad	dress:	_	Ξ ω		
	477 S ROSEMARY AVE						
	NEW Registered Office Address:			_			
	STE 219	<u>. </u>		_			
	WEST PALM BEACH	33401 L					
agent w was/we	mited liability company is not organized under the last or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited for authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ne registere liability co of the lim e limited l	ed office an impany, it i lited liabilit	nd the business officishereby confirmed ty company or as of npany.	ce of the regis	tered	
Signati	ure of a member or authorized representative of a member			Printed or typed name	e of signer		
I hereb provision the oblition mere notified	y accept the appointment as registered agent and as ons of all statutes relative to the proper and complete gations of my position as registered agent as provid by reflect a change in the registered office address, I in writing of this change.	gree to act e perform ed for in C l hereby co	in this cap, ince of my Thapter 603 onfirm that	vanitas I Camelana aan		with the ad accept ing filed a been	