## L09000090932

(Re	equestor's Name)		
(Ad	ldress)		
(Àd	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



500247749995

05/10/13--01021--011 \*\*150.00

FILED

8 MAY 10 PM 3: 43

SECRETARY OF STATE

MITANASSEE FLORIDA

C. LEWIS MAY 13 2013 EXAMINER

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

lability company submits the following statement in or agent, or both, in the State of Florida.	der to change its registered	undersigned limited office or registered	
. Name of the limited liability company: De Wet, L.L.C.	*		
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 18 Spoonbill Crt., Burleigh Waters  Queensland, Australia QL 4220		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	18 Spoonbill Crt., Burleigh Waters Queensland, Australia QL 4220	ED W 3	
09/21/2009	L09000090932	15 to	
3. Date of filing/registration in Florida	4. Document number		
6. (a) Registered Agent and Registered Office shown of Registered Agent:	n the records of the Florida D	Dept. of State:	
Registered Office Address:	9132 Strada Place, 3rd Floor Naples, FL 34108		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent:	EW Registered Office addre	<u>ess</u> :	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5633 Strand Blvd., Suite 314 Naples	,FL 34110	
f the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change (he members of the limited liability company or as otherwhe operating agreement of the limited liability company.	Florida street address of the r ntical. Or, in the case of a Florial s) was/were authorized by an wise provided in the articles of	registered office orida limited	
JUSTIN STUART JE WET GODE WE	TL.L.C.		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pund I am familiar with and accept the obligations of my pund I am familiar with and accept the obligations of my punder 608, F.S. Or, if this document is being filed to maderess, I hereby confirm that the limited liability company.	agree to act in this capacity. proper and complete perform position as registered agent a nerely reflect a change in the my has been notified in writin	I further agree to ance of my duties, ss provided for in registered office ng of this change.	

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