11200000994

(Req	uestor's Name)		
(Address)			
(Address)			
(City)	/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
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S. PRATHER





FLORIDA DEPARTMENT OF STATE Division of Corporations

October 20, 2018

KARINA P. ZANUTELLI DAVKAR POOLS LLC 12614 WINFIELD SCOTT BLVD ORLANDO, FL 32837

SUBJECT: DAVKAR POOLS LLC Ref. Number: L12000000994

We have received your document for DAVKAR POOLS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Stacy Prather Regulatory Specialist III

Letter Number: 918A00021510

COVER LETTER

TO: Registration Section Division of Corporations	
DAVKAR POOLS LLC	:
	ame of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered O	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
KARINA P ZANUTELLI	
Name of Person	
DAVKAR POOLS LLC	
Firm/Company	
12614 WINFIELD SCOTT BLVD	
Address	
ORLANDO, FL 32837	
City/State and Zip Code	
KPZG2@HOTMAIL.COM	
E-mail address: (to be used for future a	nnual report notification)
For further information concerning this matter	er, please call:
KARINA P ZANUTELLI	321 2765512
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	ng 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. N	ame of the limited liability company: DAVKAR POO	OLL LI	_C 	
2. (a)	Principal office address of limited liability company:	_ (b)	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)		IV.	(Note: MAY BE POST OFFICE BOX)
	12614 WINFIELD SCOTT BLVD		12614 W	INFIELD SCOTT BLVD
	ORLANDO, FL 32837		ORLAND	OO, FL 32837
	01/03/2012		L1200000	00994
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	KARINA P. ZANUTELLI			53
<i>5.</i> (a)	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of State	2018 NOV 2
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>s)</u>	<u> </u>
	ORLANDO , FL	32837	,	
(b)	DAVID AGURTO			3 7
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	idress:	
	PRESIDENT			
	NEW Registered Office Address:			
	12614 WINFIELD SCOTT BLVD			
	ORLANDO , FL	32837	·	
Signal I here provise the obto men	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an adjumative vote of the members of icles of organization or the operating agreement of the atture of a member or authorized representative of a member obvious of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	the regibility of the lir limited KA	istered office ompany, it is nited liability com liability com RINA P. Z. at in this capa ance of my a Chapter 605,	and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany. ANUTELLI Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept y. F.S. Or, if this document is being filed

Signature of Registered Agent