L13000013436

(Requestor's Name)						
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PICK-UP	☐ WAIT	MAIL MAIL				
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SECRETARY OF STATE OF STATE OF CORPORATION

C. LEGIS 2014

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJE	Cawley Physical Therapy and Fitness, LLC							
	Name of Limited Liability Company							
Dear Si	ir or Madam:							
The end	closed Registered Agent/Registered Office Cl	hange and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:								
Damo	on Cawley							
	Name of Person							
Cawle	ey Physical Therapy and Fitness, LLC							
	Firm/Company							
1108	24th St. West							
	Address							
Brade	enton, FL 34205							
-	City/State and Zip Code							
cawle	y.damon@gmail.com							
Ē.	-mail address: (to be used for future annual re	port notification)						
For fur	ther information concerning this matter, pleas	e call:						
Damo	n Cawley	239 298-4309						
	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	Name of the limited liability company: Cawley Physical Therapy and Fitness, LLC					
2.	(a)	1108 24th St. West	(b	1108 24	4th St. West		
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		Bradenton, FL	_	Bradent	ton, FL		
		34205	_	34205			
		1/25/13		L13000	013436		
3.		Date of filing/registration in Florida	4.		Document number		
5 .	(a)	Damon Cawley					
•	(-)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of Stat	 te:		
		25054 Peacock Lane #201					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS		-		
					T		
		Naples , FL	34114				
	(b)	Damon Cawley			14 JUL 18 PH 12: 49		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	lress:	- X CRAS		
		1108 24th St. West			- 19 The state of		
		NEW Registered Office Address:			_		
			 		-		
		Bradenton , FL	34205		_		
the age wa	cha ent v s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis ibility co f the lim limited li	tered offic mpany, it i ited liabilit iability cor	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.		
	1	ure of a member or authorized representative of a member	Dar	non Caw			
I h pro the to t	nerel ovisi obli mere	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the proper and complete in writing of this change.	ee to act performa I for in C pereby co	in this cap ince of my hapter 602 infirm that	Printed or typed name of signee racity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been		
Sig	natu	e of Registered Agent					

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