## L13000030224

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(Requesto	or's Name)			
(Address)				
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(City/State	e/Zip/Phone #)			
PICK-UP	WAIT _ MAIL			
(Business	Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing	Officer:			
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## COVER LETTER

Division of Corporations
SUBJECT: Siesta Key Waterwatt LLC  Name of Limited Liability Company
Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
lease return all correspondence concerning this matter to the following:
Dave 0' Dell, Tr.  Name of Person
Siesta Key Watercrutt, LLC Firm/Company
P = P + P
Address
Address  Savasota, FL 34231
City/State and Zip Code
, skwsports@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dave D'DUI, Jr. at (727) 642-2876
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:
☐ \$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.

2. (a) Stickney Point Rd Principal office address of limite	ed liability company:	'(b)_	terengt, [1536 St			
Principal office address of limite	d liability company:	ـــ (۳) ــ		1cknew to	int Rd	
(Note: MUST BE STREET ADDRESS)		~	) Mailing	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
(Sarasota, FL	34231		Savasoto	L, FL	34231	
			•			
2.27.2013			L13000	03022	<del>†</del>	
3. Date of filing/registration	n in Florida	4.	Docu	ıment numbe	r	
5. (a) Timothy J. Gan	non					
Registered Agent and Registered Office		the Florida D	ept. of State:			
	•	, 2				
Registered Office Address (MUST B	E FLORIDA STREET	ADDRESS)				
7724 Mister Mac	Kenzie Drive	r		•		
7724 Alistar Mac					TALE #	
Savasota	, FI	, 3424	0		SE 8 "T	
DAVE D'DUL.	To				555	
Enter name of NEW Rogistered Agent		Office addre			171	
Enter that the state of the sta	and of Its W Registered	Cince addit			自然をひ	
NEW/Registered Office Address:		<u>.</u>	<del> </del>		F. F.	
1536 Stickney foi	nt Rd					
			<del></del>			
Sarasota	. FI	3423	1			
		4.1. 0			or 1.1 . o	
If the limited liability company is not or, the change or changes are made, the Flor						
agent will be identical. Or, in the case o	f a Florida limited li	ability com	pany, it is here	by confirmed	that the change(s)	
was/were authorized by an affirmative v the aprioles of organization or the operation					nerwise provided in	
x () mid Otoll h			Dave	DUDU,	Jr.	
Signature of a member or authorized representa	ntive of a member			ed or typed nam		
I hereby accept the appointment as register provisions of all statutes relative to the parties of the obligations of my position as register to merely reflect a change in the register notified in writing of this change.  Signature of Registered Agent	stered agent and ag proper and complete red agent as provide red office address, I	ree to act in performan ad for in Ch hereby con,	this capacity. ce of my duties apter 605, F.S. firm that the li	I further agi s, and I am fa Or, if this d mited liability	ree to comply with the miliar with and accept ocument is being filed ocompany has been	