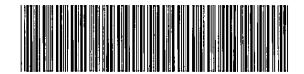
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18 JUN 1'9 PM 4: 38 SECRETARY OF STATE

O SIMMONS
JUL 25 2018

COVER LETTER

TO: Registration Section Division of Corporations							
Cathleen B. Swift Design LLC SUBJECT:							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please return all correspondence concerning this r	matter to the following:						
Cathleen B. Swift							
Name of Person							
Cathleen B. Swift Design LLC							
Firm/Company	 						
6718 Mill Run Circle							
Address							
Naples FL 34109							
City/State and Zip Code							
cbswift@icloud.com							
E-mail address: (to be used for future annual	report notification)						
For further information concerning this matter, ple	ease call:						
Frances Nolan	239 316-3250						
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:							
S25 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	me of the limited liability company: Cathleen B. S	wift			222		
2. (6718 Mill Run Circle Naples FL 34109	a	, 6	718 Mill	Run Circle Naples FL 34109		
,	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_	M	ailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)		
3.5. ((a)				Document number			
		Registered Agent and Registered Office shown on the records of the Florida Dept. Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 13302 Winding Oaks Court Suite A			n. or state.			
		Tampa ,FL	33612			E SE		
((b)	Cathleen B. Swift Enter name of NEW Registered Agent and/or NEW Registered Office			<u>s</u> :	JUN 19 PM 4: 38 JUN 19 PM 4: 38 CRETARY OF STATE LLAHASSEE, FLORIDA		
		NEW Registered Office Address: 6718 Mill Run Circle						
			34109					
the age was the	cha nt v :/wc arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the state of a member or authorized representative of a member	the regi bility co f the lin limited	stero omp nited liabi	ed office any, it is I liability lity comp en B. S	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.		
pro the to n not	visi obl nere fied	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provided ely reflect a change in the registered office address, I have the control of this change.	ve to ac perform I for in vereby c	t in t tance Chaj tonfi	this capa e of my d oter 605, rm that t	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been		