## 113000083016

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## COVER LETTER,

**TO:** Registration Section

Division of Corporations

**Brauns Swiss Investment LLC** 

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 matter to the following:

Stefan F. Braun

Name of Person

The Swiss Diner

Firm/Company

4910 Tamiami Trail N, #310-312

Address

Naples, FL 34103

City/State and Zip Code

sbraun67@bluewin.ch

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stefan Braun

239 331620°

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

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

0 /	,		
1. Na	me of the limited liability company: Brauns Swiss Invest	tment LLC	·
2 (2)	Principal office address of limited liability compa		
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)		Naples, FL 34103	
	(CONTRACT BEST TEST TEST TEST TEST TEST TEST TES		
(b)	Mailing address of limited liability company:	4910 Tamlami Trall N, # 310-31	2
(4)	(Note: MAY BE POST OFFICE BOX)	Naples, FL 34103	
06/07/20	113	L13000083016	
3. Da	te of filing/registration in Florida	4. Document number	
5. (a)	Registered Agent and Registered Office shown o	n the records of the Flori	ida Dent. of State:
(,		Agents and Corporations, INC.	
	Registered Agent:	Agents and corporations, inc.	
Registered Office Address:	Registered Office Address:	300 Fifth Avenue South	A 20 20 20 20 20 20 20 20 20 20 20 20 20
		Suites 101-330	
		Naples, Fl. 34102	272 C
			SSS J
(b)	Enter name of NEW Registered Agent and/or N	EW Registered Office a	address
	ATDAY D	0.4 5.0	
	NEW Registered Agent:	Stefan F. Braun	The second second
NEW Registered Office Address:		4910 Tamiami Trali N,	7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	(MUST BE FLORIDA STREET ADDRESS)	Suites 310-312	
		Naples	,FL 34103
confin and th liabilit the me the op	limited liability company is not organized under the med that after the change or changes are made, the le business office of the registered agent will be idently company, it is hereby confirmed that the change embers of the limited liability company or as other erating agreement of the limited liability company.  The limited liability company or as other erating agreement of the limited liability company.	Florida street address of entical. Or, in the case of (s) was/were authorized wise provided in the article.	the registered office f a Florida limited by an affirmative vote of
Stefan B	raun or typed name of signee		
	by accept the appointment as registered agent and y with the provisions of all statutes relative to the pam familiar with and accept the obligations of my er 608, F.S. Or, if this document is being filed to a ss. I hereby confirm that the limited liability company.	l agree to act in this capo proper and complete per position as registered ag nerely reflect a change in uny has been notified in v	acity. I further agree to formance of my duties, ent as provided for in the registered office writing of this change.
Signatu	re of Registered Agent		

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

A.