## 1130000096966

(Requestor's Name)						
(Address)						
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PICK-UP	WAIT MAIL					
(Business Entity Name)						
(Document Number)						
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## COVER LETTER

TO:	Registration Section Division of Corporations		3		
SUBJ					
	Name of Limited Liability Company				
Dear S	Sir or Madam:				
The er	iclosed Registered Agent/Registered Offi	ce Change and fe	e(s) are submitted f	or filing.	
Please	return all correspondence concerning th	is matter to the fo	llowing:		
Ма	rgareth Jamri				
	Name of Person		-		
Cla	mar Swimwear LLC				
	Firm/Company		-		
993	3 Sanibel Dr.		_		
	Address				
Ho	llywood, FL 33019				
	City/State and Zip Code		-		
	rgiebursztyn@hotmail.com				
ı	E-mail address: (to be used for future ann	ual report notifica	ation)		
For fu	rther information concerning this matter.	please call:			
Ма	rgareth Jamri	786	301-0220		
	Name of Person		Area Code & Dayti	me Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 thassee. Florida 323	S	
	Enclosed is a check for the following amount:				
	<b>☑</b> \$25 Filing Fee	<b>□</b> \$55	Filing Fee & Certif	ied 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. Name of the limited liability company: Clamar Swimwear LLC						
2. (a)	993 Sanibal Dr	(b)	993 Sanibel Dr			
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	Hollywood, FL 33019		Hollywood, FL 33019			
		-				
	07/05/2013		L13000095955			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	United States Corporation Agents, Inc.					
` ,	Registered Agent and Registered Office shown on the records of 13302 Winding Oak Court A	of the Florida D	pept, of State.			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	Tampa F	33612				
(b)						
Enter name of NEW Registered Agent and/or NEW Registered Office address:						
	520 S. Dixie Hwy					
	NEW Registered Office Address:	<del>-</del>	<del></del>			
	Ste 115	-				
	Hallandale	L33009				
the cha agent v was/wo	imited liability company is not organized under the lainge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the registe iability com- of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) of liability company or as otherwise provided in			
	ure of a member a authorized representative of a member	Ма	rgareth Jamri			
I herei provisi the obl to mere potifica	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address. It in writing/of this change	ed for in Che hereby conf	Printed or typed name of signee  this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept upter 605. F.S. Or, if this document is being filed from that the limited liability company has been			

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

INHS18 (2/14)