L14000179750

(Requestor's Name)
(Address)
(Address)
,
(City/Ctata/Zia/Dhasa th
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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11/28/17--01033--022 **25.00

TO MOV 28 ML 8 45
SECULIANT SEASON AND SECULIANT SECULIA



COVER LETTER

TO: Registration Se Division of Co				
SUBJECT: LC	12/ Daze C	mited Liability Company		
Dear Sir or Madam:				
The enclosed Registere	d Agent/Registered Office Cha	nge and fee(s) are submitted for filing.		
Please return all corres	pondence concerning this matte	er to the following:		
Brandon 1	Name of Person			
	Firm/Company			
451 Eve	rciceen Ave			
<u>Tegr</u> Ci	esta FL 33C ty/State and Zip Code	169		
Lazydaze E-mail address: (charters @ gmc	all Comport notification)		
For further information	concerning this matter, please	call:		
Brandon Name	مارا <u>چن</u> at (_ of Person	772) 341-9759 Area Code & Daytime Telephone Number		
STREET/CO Registration So Division of Co Clifton Buildin 2661 Executive Tallahassee, F	rporations g c Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:				
🔼 \$25 Filing F	ee	☐ \$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:	Daze C	harters		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address	CACEO Ase s of limited liability company: 'BE POST OFFICE BON	
	Tequesta, FL		Tegve	sta, FL	
	33469		·		
	Date of filing/registration in Florida				
3.	Date of filing/registration in Florida	4.	Document i	number	
5. (a)	United States Corporation AcRegistered Agent and Registered Office shown on the records of 13302 Winding Oaks C Registered Office Address (MUST BE FLORIDA STREET) Suite A	the Florida Dept.	of State:		
(b)	Brandon Wilson Enter name of NEW Registered Agent and/or NEW Registered		<u>Z</u>	FILLID F NOV 28 M SEGNIFARI OF S FMILMIASSEELTE	
	YSI Evergreen Ave NEW Registered Office Address:			8 15	
	Tequesta .FL	33469			
the cha agent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited library authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the registered ability compar of the limited I limited liabili	office and the bus by, it is hereby con iability company of ty company.	siness office of the registered firmed that the change(s) or as otherwise provided in	
Signat	ure of a member or authorized representative of a member	_Bar	Printed or typ	oed name of signee	
I herel provision the oblit to mere notified	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 provide ly reflect a change in the registered office address, I in writing of this change. The content of the change of the	ree to act in th	is connective. I forth	her agree to comply with the	
- ,					