114000192275

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
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(Business Entity Name)		
(Document Number)		
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COVER LETTER

Division of Corporations				
SUBJECT: Lew Belt Holde Name of Lin	ived 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:			
Hugh D. Upton Name of Person Seen Belt Holdings Firm/Company				
392 S. allertic av	<u>e.</u>			
Ownerd Beach Ful.				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Hugh Upton at (_ Name of Person	386) 334-2800 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			

INHS18 (2/14)





FLORIDA DEPARTMENT OF STATE Division of Corporations

August 22, 2018

MARGARET E. SWEENEY SUN BELT HOLDINGS DAYTONA LLC 555 W. GRANADA BLVD., SUITE G1 ORMOND BEACH, FL 32174

SUBJECT: SUN BELT HOLDINGS DAYTONA LLC

Ref. Number: L14000192275

We have received your document for SUN BELT HOLDINGS DAYTONA LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 418A00017374

Diane Cushing Senior Section Administrator

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.

L. Na	me of the limited liability company: Sur Belf Hold 392 S. Allartie Ave (b) 5	lings Daytona 7	KC
2 (0)	392 S. Allartie ave (b) 4 5		
2. (a)	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	y:
	armond Beach, 7cl. 32176		
2		4000192275	
3.			
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State	-	
		e:	
	392 & atlastic ave.	_	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	Ormand Beack, Fl. 32176	-	
	, FL ,,,	, we	-4.
	,,,,,,,,,,,,,,,,,,	- (196) - (196)	
(b)		<u> </u>	 기교
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	دب د	
	355 W. GRANADA BLVD	-5 7 %	्राञ्चल १९७०
	NEW Registered Office Address:	- 	
	STE. G1		5.11
	amond Beach FL 32174	_	
If the l	imited liability company is not organized under the laws of the State of Flo	orida, it is hereby confirmed that at	ter
the cha agent v was/we	inge or changes are made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited liability company, it is the authorized by an affirmative vote of the members of the limited liability cles of organization or the operating agreement of the limited liability con	e and the business office of the regi s hereby confirmed that the change y company or as otherwise provide	istered (s)
		_	€ν
Signa	ugard E. Suverey MARG.	ARET E. SWEEN	
I herei	by accept the appointment as registered agent and agree to act in this cap one of all statutes relative to the proper and complete performance of my igntions of my position as registered agent as provided for in Chapter 602 ely reflect a change in the registered office address. I hereby confirm that the writing of this change.	acity. I further agree to comply wi duties, and I am familiar with and 5, F.S. Or, if this document is being the limited liability company has b	th the accept g filed een
Signatu	re of Registered Agent		