450000 41375

(Requestor's Name)								
(Address)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
, , , , ,								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								
Grossa meneralis ta vinnig amosti								

Office Use Only



500331969785

07/31/13--01008--016 **25.00

SECRETARY OF STATE

COVER LETTER

·TO:

-TO:	Registration Se Division of Cor			
SUBJ	ECT:	MZU	U CO., LL	
		Nai	me of Limited Liab	oility Company
Dear S	Sir or Madam:			
The er	iclosed Registere	d Agent/Registered Of	fice Change and fe	e(s) are submitted for filing.
Please	return all corresp	oondence concerning th	his matter to the fo	llowing:
	John C.	Wasner III Name of Person		
		Name of Person		-
	mzw	CO., LLC Firm/Company		_
		Firm/Company		
	2645	Davis Blvd. Address	-	-
		Address		
	Naple	5 FL 3410 ty/State and Zip Code	4	-
	' Ci	y/State and Zip Code		
	atogher e	Morton Wash	erbuilders.	com ation)
		concerning this matter		·
	~ 1			
		Wasner III	at (239	~
	Name	of Person		Area Code & Daytime Telephone Number
		RIER ADDRESS:		LING ADDRESS:
	Registration Set Division of Co			stration Section sion of Corporations
	Clifton Buildir	•		Box 6327
	2661 Executive Tallahassee, Fl	Center Circle	Talla	ahassee, Florida 32314
	Enclosed is a	check for the followin	g amount:	
	\$25 Filing P	ee	□ \$55	Filing Fee & Certified Copy
INHS	8 (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 1(// 1(4)					
1. Na	me of the limited liability company: M a	2W CO.	, LLC		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				
	2645 Davis Blud.		2645	Davi	5B) vd.
	Naples, FL 34104				L 34104
	March 06, 2015		L 150000	4137	5
3.	Date of filing/registration in Florida	4.	Document	number	
5. (a)	SEAN P. MORTON	Pate - Physical De			
	Registered Agent and Registered Office shown on the records	of the Profita De	ept, or State:		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)			
	2645 Davis Blvd.				
	Naples		<u> </u>		
(b)	John C. Wasner III	- -	SECR ALLA	2019	
(0)	Enter name of NEW Registered Agent and/or NEW Register		HASA	11 1	
			SEE.	ω_	
	NEW Registered Office Address:			E	D
	2645 Davis Blvd.		SEE, FLORID,	₩. •••	
	1		₽	19 22	
	Naples	FL_3410	<u> </u>		
the cha agent v was/w	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street of the member of the operating agreement of the street of the	of the registed Hiability comp s of the limite	red office and the bu pany, it is hereby co ed liability company bility company.	isiness of infirmed to or as oth	ffice of the registered that the change(s) erwise provided in
Signa	ture of a member of authorized representative of a member		JEAN MORT	eped name	of signee
provisi the obi to mer notifie	by accept the appointment as registered agent and cons of all statutes relative to the proper and completions of my position as registered agent as proviety reflect a change in the registered office address, if my writing of this change. The of Registered Agent	agree to act in ete performan ided for in Cha I hereby conf	this capacity. I fur ce of my duties, and apter 605, F.S. Or, firm that the limited	ther agre I am fan if this doo liability (e to comply with the tiliar with and accept cument is being filed company has been