## 4600098186

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DEC 13 2016 S. YOUNG SECRETARY OF TRANS.

FALLAMASS E. TROMB.

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJ	DBW PROPERTY MANAGE	MENT, LI	_C
_		e of Limited	Liability Company
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered Offic	ce Change a	and fee(s) are submitted for filing.
Please	e return all correspondence concerning this	s matter to t	he following:
Don	na Bertucci		
	Name of Person		<del></del>
Corp	porate Direct, Inc		
	Firm/Company		
224	8 Meridian Blvd. Suite H		
	Address		
Mind	den, NV 89423		
	City/State and Zip Code		<del></del>
info	@corporatedirect.com		
	E-mail address: (to be used for future ann	ual report n	otification)
For f	urther information concerning this matter,	please call:	
Don	na Bertucci	775	782-2201
	Name of Person	ai (	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 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.

		(b	)				
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	•		Mailing address of limited lial			
	60 E. SIMPSON AVE, Box 2869		60 E S	(Note: MAY BE POST OF		,	
			60 E. S	MPSON AVE, Box 2869			
	JACKSON, WY 83001	JACKSON, WY 83001					
	05/19/2016		L160000	98486			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)				_			
	Registered Agent and Registered Office shown on the records of DETWEILER, GERRI	the Florida	Dept. of Sta	te:	<b>.</b> .	55 W	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<del>-</del>	නි. <b>ට</b>		
	1037 GREYSTONE LANE				330	高	
	SARASOTA	34232		_	12	- SHA	
	, r_	<b>-</b>		<del></del> :	7	171 CH	
(b)				_	÷.		
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	lress:	<del></del>	12		
	REGISTERED AGENTS INC.					••	
	NEW Registered Office Address:			_			
	3030 N. Rocky Point Drive, STE 150A			_			
	Tampa ਜ਼	33607					
he cha igent v vas/we	imited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating-agreement of the ture of a member or authorized representative of a member	f the regist ability co	tered office mpany, it ited liabilitiability co	ce and the business office is hereby confirmed that ty company or as otherw	of the reg the changi ise provide	gistered e(s)	

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