

L16000143283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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16 SEP -6 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 SEP -6 AM 11:06

TALLAHASSEE, FLORIDA

and/or

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SWF Property Watch

Name of Limited 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:

Kirk Noren

Name of Person

SWF Property Watch

Firm/Company

12870 Trade Way Four Ste 107 PMB 315

Address

Bonita Springs, FL 34135

City/State and Zip Code

kirk.noren@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kirk Noren

at (517)

488-5705

Name of Person

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

INHS18 (2/14)

FILED
16 SEP -6 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA