

# LI6000168360

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

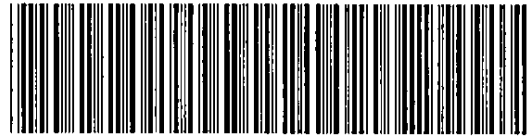
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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17 JUL 10 11 45  
FBI/DOJ

D. SCOTT

JUL 11 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WATER 428 LLC

\_\_\_\_\_  
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:

David M. Chico, Esq.

\_\_\_\_\_  
Name of Person

David Chico Law Group

\_\_\_\_\_  
Firm/Company

607 Celebration Ave.

\_\_\_\_\_  
Address

Celebration, FL 34747

\_\_\_\_\_  
City/State and Zip Code

serve@davidchicolaw.com

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

For further information concerning this matter, please call:

David Chico

407

9337713

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

FILED  
JUN 19 10 40  
17

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.011, 605.012, 605.013, 605.014, 605.015, 605.016, Florida Statutes, the undersigned limited liability company  
submits the following statement to change its registered office or registered agent, or both, in the State of  
Florida.

1. Name of the limited liability company WATER 422, LLC  
a. 556 Water Street b. 556 Water Street  
(If the office or agent is located in the State of Florida, the address must be a physical address.) (If the address is outside the State of Florida, the address must be a physical address.)  
Celebration, FL 34747 Celebration, FL 34747  
(Note: MAILING ADDRESS) (Note: MAILING ADDRESS)

09/09/2016

Date of filing, registration in Florida

L16000168360

Document number

2. Business Filings Incorporated  
(If the office or agent is located in the State of Florida, the address must be a physical address.)

1300 South Pine Island Road

PLANTATION, FL 33324  
(Note: MAILING ADDRESS)

Plantation

33324

3. David Chico

NEW Registered Agent NEW Registered Office address

607 Celebration Ave

CELEBRATION, FL 34747

Celebration 34747

If the limited liability company is so organized under the laws of the State of Florida, it is hereby confirmed that after  
the change or changes are made, the Florida street address of the registered office and the business office of the registered  
agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)  
was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in  
the articles of organization or the operating agreement of the limited liability company.

David Chico, Esq.  
(Print or type name of signer)

David Chico, Esq.  
(Print or type name of signer)

I, the undersigned, being a resident of the State of Florida, do hereby certify that I am a member of the limited liability company and I am familiar with and accept  
the change or changes in the registered office or registered agent of the limited liability company as shown on this document. I declare under penalty of perjury that the information  
provided on this document is true and correct. I declare under penalty of perjury that the limited liability company has been  
organized in accordance with the provisions of the Florida Statutes.

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00