11700208422

(Re	(Requestor's Name)					
(Ade	(Address)					
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nan	ne)				
(Do	cument Number)					
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						

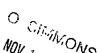
Office Use Only



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COVER LETTER

TO:

Registration Section

Divi	ision of Corporations						
CLUB LD CD	Southwood Marine LLC						
SUBJECT:	Name of Limited Liability Company						
Dear Sir or l	Madam:						
The enclosed	d Registered Agent/Registered Off	ice Change a	nd fee	(s) are submitted for filing.			
Please return	n all correspondence concerning th	is matter to the	he foll	owing:			
Jeffrey Mi	chel						
	Name of Person						
Southwoo	d Partners Inc						
	Firm/Company						
177 N US	highway 1, STE 146						
	Address						
Tequesta,	FL 33469						
	City/State and Zip Code						
jmichel00	1@comcast.net						
E-mail	address: (to be used for future ann	nual report no	tificat	ion)			
For further i	nformation concerning this matter.	. please call:					
Jeffrey Mid	chel	561	,	575-1720			
	Name of Person	ai (,	rea Code & Daytime Telephone Number			
Reg Divi Clif 266	REET/COURIER ADDRESS: istration Section ision of Corporations ion Building 1 Executive Center Circle ahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enc	losed is a check for the following	gamount:					
⊿ \$	25 Filing Fee		\$55 H	Filing Fee & Certified Copy			
INHS18 (2/14	4)						

✓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. Na	ame of the limited liability company: Southwood I	/larine	LLC	
2. (a)	177 N US Highway 1		_(b) 177 N U	S Highway 1
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	STE 146		STE 146	;
	Tequesta, FL 33469		Tequesta	a, FL 33469
	October 9, 2017		L1700020	08422
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Southwood Partners Inc			
J. (u)	Registered Agent and Registered Office shown on the records of	the Flor	ida Dept. of State	- !!
	11 Splitrail Circle			
	Registered Office Address (MUST BE FLORIDA STREET) Ste 146	ADDRE	<u>(SS)</u>	THE STATE OF THE S
	Tequesta	3346	9	ON 13
(b)	Southwood Partners Inc Enter name of NEW Registered Agent and/or NEW Registered 177 N US Highway 1 NEW Registered Office Address: STE 146	d Office	address:	THE ED
	Tequesta	3346	9	
the cha agent v was/we the arti	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited l cre authorized by an affirmative vote of the members ieles of organization or the operating agreement of the ture of a member or authorized representative of a member	f the re iability of the le limite	gistered office company, it is imited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
I here	by account the appointment as registered agent and as	ree to c	ict in this can	acity I further goree to comply with the
provisi the obl to mero notified	or the left the appointment as registered agent and complete one of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address. It is writing of this change	e perfoi ed för i hereby	n Chapter 605 n Chapter 605 confirm that	duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
	Division of Corporations P.O.			ssee, FL 32314