117000262339

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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MAY 29 2019 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: PW HOLDINGS, 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 f	ollowing:					
MONET WHEATLEY PHILLIP						
Name of Person	-					
PW HOLDINGS, LLC.						
Firm/Company	_					
731 DUVAL STATION ROAD, SUITE 107-9						
Address						
JACKSONVILLE, FL 32218						
City/State and Zip Code	_					
LARMSON@COMCAST.NET						
E-mail address: (to be used for future annual report notific	cation)					
For further information concerning this matter, please call:						
MONET WHEATLEY PHILLIP 904	537-4510					
Name of Person	Area Code & Daytime Telephone Number					
Registration Section Reg Division of Corporations Div Clifton Building P.O	ALING ADDRESS: gistration Section ision of Corporations . Box 6327 tahassee, Florida 32314					
Enclosed is a check for the following amount:						
☑ \$25 Filing Fee ☐ \$55	5 Filing Fee & Certified Copy					

INHS18 (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. N	lame of the limited liability company: PW HOLDING	GS, LLO).				
2. (a	731 DUVAL STATION ROAD	(h	(b) 731 DUVAL STATION ROAD				
(4	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*	Mailing ac	nddress of limited liabilit MAY BE POST OFFI		-	
	SUITE 107-9	_	SUITE 107-9				
	JACKSONVILLE, FL 32218	_	JACKSONVILI	LE, FL 32218			
	DECEMBER 27, 2017		L17000262339				
3.	Date of filing/registration in Florida	4.	Docum	nent number			
5. (a	, MONET WHEATLEY PHILLIP						
J. (Registered Agent and Registered Office shown on the records of MANAGER	the Florida	Dept, of State:				
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS	1				
	2834 SPOTTED EAGLE DRIVE			271	ಲಿತ		
	JACKSONVILLE , FL	32226		}-: 	圣器		
(b				# () (n)	26 N4 €0	CHO-M	
(0	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	iress:	ران المناطقة المناطق	F.		
				71.0	. ôù ⊒ĸ	7/}	
	VEW Daylor Address	<u></u>		83.	 	••	
	NEW Registered Office Address:			>	Ŋ		
	731 DUVAL STATION ROAD, SUITE 107-9						
	JACKSONVILLE	32218					
the cl agent was/v the ar Sign I her provi. the old to me notific	limited liability company is not organized under the law range or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia very authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the factor of a member or authorized representative of a member service of a member as registered agent and agree solingations of my position as registered agent as provided raily reflect a change in the registered office address. It is a complete in writing of this change.	the regis ability co of the lim limited l MO ree to act performed d for in C	stered office and the impany, it is hereby ited liability company. NET WHEATLE Printed in this capacity. I cance of my duties, if the impact items is a control of the impact in the capacity. I cance of my duties, if the impact items is a control of the impact items in the impact items is a control of the impact items in the impact items is a control of the impact items in the impac	the business office of by confirmed that the any or as otherwise by PHILLIP or typed name of signed further agree to confirm further agree to conf	the reger chang provid mply with and is heir	gistered e(s) ed in with the laccept	

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