L18CCC 133853

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Lazy Daze 40 LLC Name of Limited Lie	ability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and f	ee(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	ollowing:
Marlys R. Clark	
Name of Person	_
Lazy Daze LLC	
Firm/Company	
3/65 N Atlantic Ave	Apt A-509
Cocoa BeachFL 3293	
City/State and Zip Code	_
E-mail address: (to be used for future annual report nonfic	ole hormail. com
For further information concerning this matter, please call:	
Marlys R. Clark at (253)	Z09 - 2449 Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
□ \$25 Filing Fee □ \$5.	5 Filing Fee & Certified Copy
1NHS18 (2/14)	OU ,

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

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability corsubmits the following statement in order to change its registered office or registered agent, or both, in the State of Fi

1. Name of the limited liability company: LAZY Duze 40			
2. (a) 3165 NAtlantic Ave (b) Same	2		
Principal office address of limited liability company: Mailing address of limited liability company:			
(Note: MUST BE STREET ADDRESS) (Note: MAY BE PO	_	701.130	<u> </u>
Cocoa Beach FL 32931	-		_
Coccon 15tuch FC 5431			
05/17/2018 L 18000	123	96	Σ,
3. Date of filing/registration in Florida 4. Document number			
5. (a) United States CORP Agents Inc			
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
Orlando .FL 32022		2020	
	1773 1771 2413	1020 aug - 7	•
(b) Marlys Rae Clark	NA.	-7	i
Enter name of NEW Registered Agent and/or NEW Registered Office address:	<u> </u>	¥	Ĩ
3165 NAHantic Ave	 51	ထ္	(
NEW Registered Office Address:	rn.	39	
Apt A-504			
Cos a Docala 22931			
Cocoa Beach II 32931			
If the limited liability company is not organized under the laws of the State of Florida, it is hereby c change or changes are made, the Florida street address of the registered office and the business office	onfirm	ed that	aft tere
agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed was/were authorized by an affirmative vote of the members of the limited liability company or as ot	l that th	ie chan	ge(
the articles of organization or the operating agreement of the limited liability company.			
Signature of a member wanthorized representative of a member Printed or typed name	e of sign	<u> 21</u>	
Thereby accept the appointment as registered agent and agree to act in this capacity. I further agr	ee to c	omply v	witi
provisions of all statutes relative to the proper and complete performance of my duties, and I am far the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this do to merely reflect a change in the registered office address. I hereby confirm that the limited liability notified in writing of this change.	ocumer compo	u is bei my has	ng be
	•	-	
Signature of Registered Agent			
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			

FILING FEE: \$25.00