L19000019586

(Requestor's Name)									
(Address)									
(Address)									
·									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Parison Fality Name)									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									

Office Use Only



400330178114

05/10/19--01032--037 **50.00



JUN 22 2019 BALBASTER

COVER LETTER

TO:	_	stration Section sion of Corporations						
SUBJE	г <i>С</i> Т•	Quick Dump SWFL, LLC						
2,7,7,7,7	.,	Nan	ne of Li	mited Lis	ability Company			
Dear S	ir or N	Aadam:						
The en	closec	l Registered Agent/Registered Off	ice Cha	nge and	fee(s) are submitted for filing.			
Please	return	all correspondence concerning th	is matte	r to the f	Collowing:			
Edwa	ard L.	Wotitzky, Esq.						
		Name of Person						
Wotit	zky, \	Wotitzky, Ross, McKinley & \	Young,	P.A.				
•		Firm/Company			-			
1107	W. N	Marion Avenue, Unit 111						
		Address			_			
Punta	a Gor	da, FL 33950						
		City/State and Zip Code			-			
ewoti	tzky@	@wotitzkylaw.com						
E	E-mail	address: (to be used for future and	iual rep	ort notifi	cation)			
For fur	ther in	nformation concerning this matter	, please	call:				
Edwa	ırd L.	Wotitzky	at (941	639-2171			
		Name of Person	_	-	Area Code & Daytime Telephone Number			
	Registration Section Reg Division of Corporations Div Clifton Building P.O				AILING ADDRESS: gistration Section vision of Corporations b. Box 6327 lahassee, Florida 32314			
Enclosed is a check for the following amount:								
	- \$2	25 Filing Fee		□ \$5	5 Filing Fee & Certified Copy			
INHSI	8 (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.	Na	me of the limited liability company: Quicl	k Dump S	SWFL	, L	.LC		
2.		512 East Marion Avenue		(b		512 Eas	enue	
	(α)	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)		. (0	<i>,</i> –	М	••	limited liability company: POST OFFICE BOX)
		Punta Gorda, Florida 33950		-	F	Punta Go	orda, Florida	33950
3.		January 17, 2019 Date of filing/registration in Florida		- - -	_ L1	1900001	9586	ıber
		John G. Kizer						·
5.	(a)	Registered Agent and Registered Office shown on the 512 East Marion Avenue Registered Office Address (MUST BE FLORIDA	ept. of State:		-1			
		Punta Gorda	, FL	33950) —		FIL 19 JUN 10 SECAL MARS	
	(b)	Thomas G. Knapp						
	` ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW I</u>	Registered O	ffice add	dre	288]		AMIN 43
		310 Gill Street						± 5
		NEW Registered Office Address:						
		Punta Gorda	, FL	33950	0			
the age wa	cha ent v s/wo	mited liability company is not organized und nge or changes are made, the Florida street actill be identical. Or, in the case of a Florida I re authorized by an affirmative vote of the modes of organization or the operating agreeme	ddress of th imited liab embers of	ne regis ility co the lim	ste om uite	red office pany, it is ed liability	and the busine hereby confirm company or as	ess office of the registered ned that the change(s)
- 				Tho	om	nas G. Kı		
1 h pro the to i	erel ovisi obli nere ified	ure of a member or authorized representative of a member of a member of all statutes relative to the proper and constants of members of all statutes relative to the proper and constants of my position as registered agent as by reflect a change in the registered office and in writing of this change.	t and aaree	e to act erforme for in C reby co	t in an Chi on)	this capa	Printed or typed nacity. I further duties, and I am, F.S. Or, if this he limited liabi	garee to comply with the