## LZ1 000 161625

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

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## COVER LETTER

	gistration Section vision of Corporations				
(1111111111111111111111111111111111111	TDW Properties, LLC				
SUBJECT	Name of Limited Liability Company				
Dear Sir or	Madam:				
The enclose	ed Registered Agent/Registered C	Office Change and	fee(s) are submitted for filing.		
Please retur	m all correspondence concerning	this matter to the	following:		
Bradley F. V	Vhite, Esq.				
	Name of Person	<del></del>	<del></del>		
WhiteBird, I	PLLC				
	Firm/Company				
730 E. Straw	bridge Avenue, Suite 209				
	Address				
Melbourne, l	FL 32901				
_	City/State and Zip Code				
twinton04@	comeast.net				
E-mai	l address: (to be used for future a	nnual report notif	ication)		
For further	information concerning this matte	er, please call:			
Bradley F. W	Vhite, Esq.	321 at (	327-5580		
	Name of Person	\	Area Code & Daytime Telephone Number		
Reg Div P.C	diling Address: gistration Section vision of Corporations D. Box 6327 lahassee, 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

☐ \$55 Filing Fee & Certified Conv

## 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	ame of the limited liability company:TDW Properties.	LLC	· · · · · · · · · · · · · · · · · · ·
2 (3)		(h)	
(u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(11)	Mailing address of limited liability company:  Onte: MAY BE POST OFFICE BOX
	126 Pier Lane	P.O. Bo	x 1464
	Melbourne Beach, FL 32951	Melbou	rne, F1, 32902
	April 15, 2021	L210001c	61625
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of S	
	Bradley F. White, Esq.	the French Dept. of C	uite.
	Registered Office Address	ADDRESS)	<b>202</b>
	730 E. Strawbridge Avenue, Suite 209	ZIIZI APR	
	Melbourne F	32901	29 538
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Terry D. Winton		21 APR 29 PM II: 02  LÄHÄSSEE, FLORIDA
	NEW Registered Office Address:		<del>_</del>
	126 Pier Lane		
	Melbourne, FI	32951	
change agent v was/w the arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the D. W.	ws of the State of the registered office a ability company, it of the limited liabi	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.
provisi the obj to mer notifie	by accept the appointment as registered agent and aginous of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.  D. With the of Registered Agent	ree to act in this co performance of m d for in Chapter 6 hereby confirm tha	ipacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been

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