## N9LOCCCCH 281

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(Bi	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to	Filing Officer:			

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10/1¢/17--01007--006 \*\*35.00

2017 OCT 10 PM 1: 52

C. GOLDEN

OCT 1 0 2017

## **COVER LETTER**

10:	Amendment Section Division of Corporations
SUBJI	Daytona Beach Swimming, Inc
5010	Name of Corporation
	N96000004887
DOCU	MENT NUMBER:
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	eturn all correspondence concerning this matter to the following:
	Natalie Lochte
	Name of Contact Person
	Daytona Beach Swimming, Inc
	Firm/Company
	230 Lytham Way
	Address
	Daytona Beach FL 32124
	City/State and Zip Code
	1foreverpink@gmail.com
	E-mail address: (to be used for future annual report notification)
For fu	her information concerning this matter, please call:
	e Lochte 386 681-7155
	Name of Contact Person at (
Enclos	d is a \$35.00 check made payable to the Department of State.
	Mailing Address:  Amendment Section  Street Address:  Amendment Section
	Division of Corporations Division of Corporations
	P.O. Box 6327 Clifton Building
	Tallahassee, FL 32314 2661 Executive Center Circle
	Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1. nge is submitted for a corporation organized under the laws of	508, Florida Statutes, this The State of Florida		
in orde	r to change its registered office or registered agent, or both, in	the State of Florida.		
1. The name of t	Daytona Beach Swimming, Inc.			
2. The principal	230 Lytham Way Daytona Beach, FL 3	2124		
	P O Box 291968 Port Orange	e, FL 32129-1968		
3. The mailing a	ddress (if different):	,,		
4. Date of incorp	oration/qualification: Document num	N9600004887		
	street address of the current registered agent and registered of tment of State: (If resigned, enter resigned)	fice on file with the		
	Annemarie Rizzo - resigned			
	3230 Riverview Lane	2017 OCT		
	Daytona Beach, FL 32118	CT 10		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Natalie Lochte	52		
	230 Lytham Way			
	P.O. Box NOT acceptable Daytona Beach, FL 32124			
The street addre	ss of its registered office and the street address of the busines be identical.	ss office of its registered agent,		
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.				
Signature of an officer or director				
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this of comply with the provisions of all statutes relative to the promy duties, and I am familiar with and accept the obligation of a document is being filed merely to reflect a change in the relation that the corporation has been notified in writing of this change.	capacity		
Sign	May Delte 10/3/20, nature of Registored Agent	Date		
If signing on be	nalf of an entity:			
Ty	ped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*