

P03000101053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

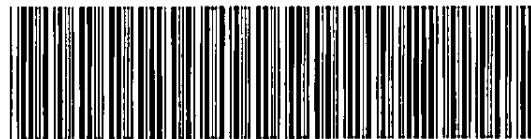
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2025 SEP 30 PM 1:42
DIVISION OF COMMERCIAL
REGISTRATION

SECRETARY OF STATE
DIVISION OF COMMERCIAL
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2025 SEP 30 PM 12:17

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Sweetwater Investments, Inc.

Please Debit FCA000000003 For: 35

Thank you Seth Neeley



____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

Signature

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SWEETWATER INVESTMENTS, INC.
Name of Corporation

DOCUMENT NUMBER: P03000107053

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

WALTER H. MESSICK

Name of Contact Person

GALVAN MESSICK, PLLC

Firm/Company

951 YAMATO RD., SUITE 250

Address

BOCA RATON, FL 33431

City/State and Zip Code

crawford@higheroptions.co

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WALTER H. MESSICK

Name of Contact Person

at (561) 994-5956

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SWEETWATER INVESTMENTS, INC.
2. The principal office address: 1606 HEADWAY CIR, STE 9971, AUSTIN TX 78754
3. The mailing address (if different): _____
4. Date of incorporation/qualification: SEP 30, 2003 Document number: P03000107053
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

REGISTERED AGENT SOLUTIONS, INC.

1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

GALVAN MESSICK, PLLC

951 YAMATO RD., SUITE 250

P.O. Box NOT acceptable

BOCA RATON, FL 33431

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

Jason Crawford

JASON CRAWFORD (SEP 29, 2025 14:00:01 EDT)

Signature of an officer or director

JASON CRAWFORD, PRESIDENT

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

WALTER H. MESSICK

WALTER H. MESSICK (SEP 29, 2025 14:00:01 EDT)

Signature of Registered Agent

Sep 29, 2025

Date

If signing on behalf of an entity:

WALTER H. MESSICK, MANAGER

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2025 SEP 30 PM 12:17