## P15000006099

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: DWB CAPITAL, Inc.
Name of Corporation

DOCUMENT NUMBER: P1500006099

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:

David W. Bodner

Name of Contact Person

DWB CAPITAL, Inc.

Firm/Company

9505 AQUA LANE

Address

Address

33554

City/State and Zin Code

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

For further information concerning this matter, please call:

David Bodner at (813) 382-7281

Name of Contact Person 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: DWB Capital, Inc
2. The principal	office address: 9505 AQUA LN
·	Odessa, Fl 33556
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 1-20-2015 Document number: P150000609
	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	American Safety Council, Inc.
	5125 Adanson St. Suite 500
	ORlando, FL 32804
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	David W. Bodner 52 ° Fil
	9505 AQUA LN
	P.O. Box NOT acceptable  Odessa, FC 33554  BM 5
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change.
Signatur	Mbella David W. Bodner  re of an officer or director Printed or typed name and title
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 capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
	When Date March 5,2015  Date Date
_	half of an entity:
	and an Drinted Manage

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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