

P19000033297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

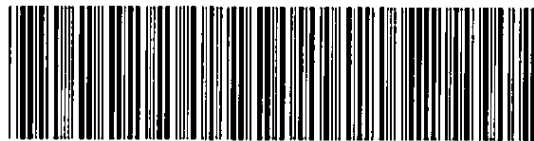
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500332702945

08/12/19--01014--005 \*\*55.00

S TALLENT

AUG 19 2019

FILED

2019 AUG 12 AM 10:51

SECRETARY OF STATE  
TALLAHASSEE, FL

R1 A-CH

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Southwest Florida RV Center Inc  
Name of Corporation

**DOCUMENT NUMBER:** P19000033897

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:

Jaclyn Carrington  
Name of Contact Person

SWFLRV  
Firm/Company

P O Box 147  
Address

Alva, FL 33920  
City/State and Zip Code

SCRVSERVICES@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jaclyn Carrington at (239) 209-0607  
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**

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Southwest Florida RV Center Inc  
2. The principal office address: 2181 Dixie Lane, Alva, FL 33920  
3. The mailing address (if different): P O Box 147, Alva, FL 33920

4. Date of incorporation/qualification: 4/16/2019 Document number: P19000033897

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)

Keith E Carrington  
1981 Goode Ave  
Alva, FL 33920

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

Keith E Carrington  
17311 Palm Beach Blvd  
P.O. Box NOT acceptable  
Alva, FL 33920

FILED  
2019 AUG 12 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FL

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.

[Signature]  
Signature of an officer or director

Keith E Carrington/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.*

[Signature]  
Signature of Registered Agent

8/7/19  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE