

6/11/24, 10:07 AM

Division of Corporations

P93 0000 17612

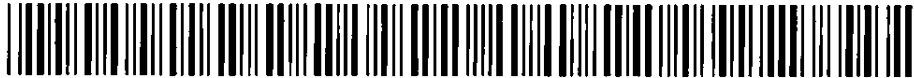
Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000203660 3)))



H240002036603ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006

Phone : (407)425-7010

Fax Number : (407)425-2747

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

2024 JUN 11 AM 8:10

FILED

RECEIVED

2024 JUN 11 PM 2:25

REGISTERED AGENT CHANGE

SWD HOLDINGS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SWD HOLDINGS, INC.
Name of Corporation

DOCUMENT NUMBER: P93000017512

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:

William P. Weatherford

Name of Contact Person

Zimmerman, Kiser & Sutcliffe, P.A.

Firm/Company

315 E. Robinson Street, Suite 600

Address

Orlando, FL 32801

City/State and Zip Code

registeredagent@zksraservices.com

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

For further information concerning this matter, please call:

Eileen Soto

Name of Contact Person

at (407) 425-7010

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

FILED
2024 JUN 11 AM 8:10

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: SWD Holdings, Inc.
2. The principal office address: 1016 Temple Grove, Winter Park, FL 32789
3. The mailing address (if different): P.O. Box 540417, Orlando, FL 32854
4. Date of incorporation/qualification: 3/4/1993 Document number: P93000017612
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)

Doremus, Joseph D.

1016 Temple Grove

Winter Park, FL 32789

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

ZKS Registered Agent Services, LLC

315 E. Robinson Street, Suite 600

P.O. Box NOT acceptable

Orlando, FL 32801

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 of an officer or director

Joseph D. Doremus

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 of Registered Agent: William P. Weatherford

6-7-2024
Date

If signing on behalf of an entity:

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

CR25645 (04/13)

2024 JUN 11 AM 8:10

FILED