P960000 410402

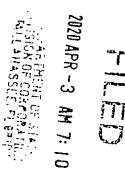
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone	#)			
PICK-UP WAIT	MAIL			
(Business Entity Nam	ne)			
(Document Number)				
Certified Copies Certificates	of Status			
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COVER LETTER

TO:

TO:	Amendment Section Division of Corporations			
SUBJ Name	JECT: Zwilling Enterprises, Inc.			
DOC	UMENT NUMBER: 96000046402			
		Office/Agent and fee are submitted for filing.		
	e return all correspondence concerning this			
Thom	nas M. Zwilling	•		
	e of Contact Person			
Zwill	ing Enterprises, Inc.			
Firm/	Company	 _		
65 Pe	eleg Road			
Addre	ess			
Portsi	mouth, RI 02871			
City/S	State and Zip Code			
	thomas.zwilling56@gmail.co	om		
E-ma	ail address: (to be used for future annual	Freport notification)		
For fi	urther information concerning this matter, p	please call:		
Thon	nas M. Zwilling	at (904) 860-8426 Area Code & Daytime Telephone Number		
	Name of Contact Person	Area Code & Daytime Telephone Number		
Encle	osed is a \$35.00 check made payable to the	Department of State.		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Amendment Section Division of Corporations	Amendment Section Division of Corporations		
	P.O. Box 6327	The Centre of Tallahassee		
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cl	e provisions of sections 607,0502, 617,0502, hunge is submitted for a corporation organize ler to change its registered office or registere	ed under the laws of the State of $rac{\mathrm{F}}{}$	Torida		
1. The name o	f the corporation: Zwilling Enterprises, Inc.				
2. The principal office address: 5538 Highway Avenue, Jacksonville, FL 32254					
3. The mailing	address (if different): 95 Peleg Road, Porstm	outh, R1 02871			
4. Date of inco	orporation/qualification: May 24, 1996	Document number: P9600004	16402		
5. The name a	nd street address of the current registered age artment of State: (If resigned, enter resigned)	ent and registered office on file wit	th the		
	Thomas M. Zwilling - resigned	TA .	20 AF		
	534 Golden Links Drive	A H A	2020 APR -3		
	Orange Park, Fl. 32073				
6. The name a (if changed)	nd street address of the new registered agent		<u>الم</u> الم		
	Samuel J. Beckman				
	1516 Palmetto Avenue				
	Sanford, FL 32771	NOT acceptable			
The street add	lress of its registered office and the street ac ill be identical.	ddress of the business office of its	s registered agent.		
	was authorized by resolution duly adopted by the board, or the corporation has been noti				
Thom	as M Zwilling	Thomas M. Zwilling, President			
of my duties, e docúment is b	ature of an other or success pt the appointment as registered agent and be to comply with the provisions of all statut and I am familiar with and accept the oblig being filed merely to reflect a change in the has been notified in writing of this change.	Printed or typed name and to agree to act in this capacity, es relative to the proper and com ation of my position as registered registered office address, I hereb	mlete nerformanci		
* Sam	wel J. Bel kman	X 3(30(2020	<u> </u>		
If signing on	behalf of an entity:				
	Typed or Printed Name				
	* * * FILING FEI	6: \$35.00 * * *			