LO3000014364

(Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	÷ #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
1		

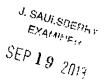
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Freedom Boat Club, LLC Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:			
Joseph A. Bettley,	CPA		
Freedom Boat Club	LLC A SEF		
990 Laguna Dr. Address	. 18 		
Venice FC 34285 City/State and Zip Code	9: 53 PRIDA		
Jettley & freedomboat dub. com JE-mail address: (we used for future annual report notification)			
For further information concerning this matter, please call:			
Joseph Bettey at (941) 451-8756 x303 Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amou	int:		
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:Fre	edom Boat Club LLC
2. (a) Principal office address of limited liability con (Note: MUST BE STREET ADDRESS)	npany: 990 Laguna Dr. Venice FL 34292
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	990 Laguna Dr. Venice El 34285.
4 22 03 3. Date of filing/registration in Florida	LO3000014364 4. Document number
5. (a) Registered Agent and Registered Office show	•
Registered Agent:	Bettley, Joseph A., CPA
Registered Office Address:	_ 1100 <u>Tamiami Trail</u> , SEB <u>Venice</u> FL 34285
(b) Enter name of NEW Registered Agent and/o	r NEW Registered Office address:
NEW Registered Agent:	Bettley, Joseph A., CPA
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	990 La guna Dr. Venice FL 34285
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the charthe members of the limited liability company or as of the operating agreement of the limited liability company.	the Florida street address of the registered office identical. Or, in the case of a Florida limited nge(s) was/were authorized by an affirmative vote of herwise provided in the articles of organization or
Signature of a member or authorized representative of a member	
Printed or typed name of signee	
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to t and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability consignation of Registered Agent	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office mpany has been notified in writing of this change.
organism of Regimental Agent	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00