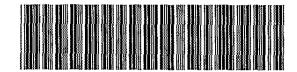
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: KEY LARGO MAR		
(Name of Limit	ted Liability Company)	
· · · · · ·		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
	•	
CHRISTOPHER BROWN		
(Name of Person)	2000 AL	
	SECRETA ALLAHA	
SILERT WORLD SCUBA LLC		
(Firm/Company)	85 6 1	
•	FESS H	
103200 OVERLSEAS HWY	PHIZ: OF STATE E.FLOR	
(Address)	DA 48	
	_	
KEY LARGO FL 33037	<u> </u>	
(City/State and Zip Code)		
For further information concerning this matter, p	lease call:	
CHRISTOPHER BROWN at	(305) 451-3252	
(Name of Person)	(Area Code & Daytime Telephone Number)	
(**************************************	(1200 000 10 00) 01110 1000 1000 1000 100	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following an	mount:	
\$25 Filing Fee ■ Comparison of the compariso	\$55 Filing Fee & Certified Copy	

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

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

(Signature of Registered Agent)