## 115212

(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:							
J. HORNE							
J. HORNE FEB 2 8 2023							

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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO. : I200	00000195
	REFERENCE : 5180	62 8378148
	AUTHORIZATION :	62, 8378148 Fine bell man
	COST LIMIT : \$ 25	(60)
ORDER DATE	: February 23, 2023	
ORDER TIME	: 10:34 AM	
ORDER NO.	: 518062-064	
CUSTOMER NO	: 8378148	
<b>.</b>		
	CHANGE OF AGENT	
NAME :	: POMPANO POWER AND MAR	INE, LLC
PLEASE RETUR	RN THE FOLLOWING AS PROOF O	F FILING:
	TIFIED COPY IN STAMPED COPY	

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na	ame of the limited liability company: POMPANO PO	WER AN	ID M	ARINE, LLC		
2. (a)	1500 NW 15TH AVENUE	(	b)	O. BOX 338	81	
<b>2</b> . ( <b>u</b> )	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(	· ,		-	ited liability company:  OST OFFICE BOX)
	POMPANO BEACH, FL 33069			AMPA, FL 3	3601	
	12/03/2009		L09	0000115212		
3.	Date of filing/registration in Florida	4.		Doc	ument numbe	r
5. (a)	Registered Agent and Registered Office shown on the records of CT CORPORATION SYSTEM  Registered Office Address (MUST BE FLORIDA STREET)			l. of State:		20 54.
	1200 S PINE ISLAND RD #250		_			23 F.
	PLANTATION FI	33324				923 FEB 27
(b) <u>.</u>	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	d Office ac	idress	:		Mi 10: 22
	NEW Registered Office Address:			· -		
	1201 Hays Street					
	Tallahassee , FI	32301				
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited like the authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register ability co of the lin limited	ed of ompa nited liabil	fice and the ny, it is here liability con	business office by confirmed apany or as of 	ce of the registered I that the change(s)
Signa	ure of a member or authorized representative of a member		Printed or typed name of signee			
provisi the obl to mere ngrified	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It is in writing of this change.	verform	ance	of my duties	s, ànd Lam fai	miliar with and accept
	re of Registered Agent Grace E. Kirby, Asst.	Vice Pre	siden	ŧ		
PIRHTI	ie or wekiziteten whent					