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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 9, 2016

SANDRA STILWELL PO BOX 848 CAPTIVA, FL 33924

SUBJECT: CAPTIVAISLANDYACHTCHARTERS LLC

Ref. Number: L15000034132

We have received your document for CAPTIVAISLANDYACHTCHARTERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 716A00012211

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Corporations				
SUBJECT: Captiva Island Pack	rt Charko LLC. ited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter	to the following:			
Sandra Stilwell Name of Person				
Captiva Island 9ach+Charters 1 Firm/Company	<u>lc</u>			
PO Box 848 Address				
Capting, FL 33924 City/State and Zip Code	 			
E-mail address: (to be used for future annual repor	n t notification)			
For further information concerning this matter, please ca	dl:			
Sandra Stilwell at (=	239) 395-5320 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 amount:				
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)

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.

rioriuu.	^		1	_		
1. Nam	ne of the limited liability company: <u>Captive</u>	-Island4	ach-Chorte	s UC.		
2. (a) .	14970 CAPTIVA DE Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) (Captiva, FL 33924	(b)	(<u>Note: M</u>	ress of limited liab	FICE BOX)	
3 5. (a) _	2/24/15 Date of filing/registration in Florida ECIL J. Brown	4.		34/32 nt number		
-	Registered Agent and Registered Office shown on the record Registered Office Address (MUST BE FLORIDA STRI 14970 Captina Dr. Captina	<u>EET ADDRESS)</u>			16 341	
_	Enter name of NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Office Address: NEW Registered Office Address: PO BOX 8-18 1508	Lane	- PO 848	239-2	JUL -8 PH 2: 4 M	m 724
-	Copting	, FL <u>33</u>	124		kll	
the changagent will was/were	nited liability company is not organized under the ge or changes are made, the Florida street address ill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the membeles of organization or the operating agreement of	ss of the registe ed liability con ers of the limit	ered office and the lapany, it is hereby conditions the lapany it is hereby compan	ousiness office on firmed that t	of the registe he change(s)	ered)
Signatur	re of a member or authorized representative of a member	· · · · · · · · · · · · · · · · · · ·	Erik J. Printed or	Brown	246	
Digimuu	to or a momon or annotized representative of a member		Frince of	rahen umite of gigt	icc	

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 Jumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change

Aprix Solwies

Signature of Registered Agent