P00000091195

ICMH, I NC. Inter Coastal Marin	e Holdin	g Corp, In	<u>.</u>
244 N. Causeway New Smyrna Beach, FL 32	169		

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	منتقل
(Corporation Name)	(Document #) -07/03/0101008005 *****70.00 *****70.00
2(Corporation Name)	(Document #)
3	
(Corporation Name)	(Document #)
4(Corporation Name)	500044569855 (Document #)
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NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	AMENDMENTS Amendment Resignation of R.A., Officer/Director of the control of the
	Trademark Other
	Examiner's Initials

CR2E031(7/97)

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

Pursuant to t	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,					
-	ned corporation organized under the laws of the State of Florida	. ,				
submits the following statement in order to change its registered office or registered agent, or both, in						
the State of F						
1. The name of	of the corporation: Intercoastal Marine Holding Corporation	: -				
2. The mailing	ng address of the corporation: 244 North Causeway, New Smyrna Beach, FL 32169					
3. Date of inc	corporation/qualification: 9/27/00 Document number: P00000091195	;				
4. The name a	and address of the current registered agent and office:					
	Frank C. Schaaf					
	244 N. Causeway					
	New Smyrna Beach, FL 32169					
5. The name a	and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)					
	Susan L. Larson					
	244 N. Causeway					
	New Smyrna Beach, FL 32169					
The street add agent, as chan	dress of its registered office and the street address of the business office of its registered nged, will be identical.	8:				
Such change vauthorized by	was authorized by resolution duly adopted by its board of directors or by an officer so the board.					
Jus	9 9	-				
(Signatur	ure of an officer, chairman or vice chairman of the board) (Date)	en retran				
	Susan L. Larson, Juanus					
	(Printed or typed name and title)					
Having been n corporation, l I further agre performance c registered age	named as registered agent and to accept service of process for the above stated I hereby accept the appointment as registered agent and agree to act in this capacity. See to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as ent.					
An	m & Jam 6-1-01	-5				
1000	(Signature of Registered Agent) (Date)	•				
lf signing on beh	half of an entity:					
	SUSAN L. LARSON CORP. TREASURER (Capacity)					
	(Typed or Printed Name) (Capacity)					

CR2E045(9/00)

* * * FILING FEE: \$35.00 * * *