

P13D00071825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

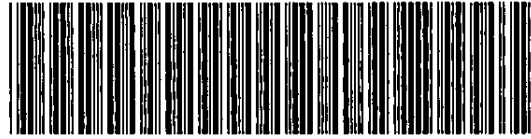
(Business Entity Name)

(Document Number)

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T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Saltwater Fish Haven, Inc.
Name of Corporation

DOCUMENT NUMBER: P13000071825

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michelle Gluth
Name of Contact Person

Saltwater Fish Haven, Inc.
Firm/Company

12602 NW 6th St
Address

Coral Springs, FL 33071
City/State and Zip Code

Michellegluth@yghco.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Gluth at (954) 263-2362
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Saltwater Fish Haven, Inc.
2. The principal office address: 12201 NW 35th St Unit 300
Coral Springs, FL 33071
3. The mailing address (if different): 12602 NW 6th St
Coral Springs, FL 33071
4. Date of incorporation/qualification: 8/27/2013 Document number: P13000071825
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Michelle Gluth
10627 NW 53rd Street
Sunrise, FL 33351

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Michelle Gluth
12602 NW 6th St
P.O. Box NOT acceptable
Coral Springs, FL 33071

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Michelle Gluth
Signature of officer or director

Michelle Gluth
Printed or typed name and title

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 familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Michelle Gluth
Signature of Registered Agent

9/25/2013
Date

If signing on behalf of an entity:

Saltwater Fish Haven, Inc
Typed or Printed Name

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