## 304786

(Requestor's Name)					
(Address)					
(Address)					
1, 10	(Address)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Ru	siness Entity Name	-)			
(00	siness Entity Name	<del>-</del> )			
	<del></del>				
(Document Number)					
Certified Copies	_ Certificates	of Status			
		1			
Special Instructions to Filing Officer:					

Office Use Only



800342759278

04/08/20--01011--003 \*\*35.00

U-1:Ui... 3-

77.7

R. WHATE. APR 2 0 2020

## **COVER LETTER**

The second second

TO:	Amendment Section Division of Corporations	
SUBJ Name	JECT: Bradford Marine, Inc.	···
DOC	UMENT NUMBER: 304786	
The e	enclosed Statement of Change of Register	red Office/Agent and fee are submitted for filing.
	e return all correspondence concerning th	
Tom '	Thomas	
Name	of Contact Person	<del></del>
	Thomas, CPA	
Firm/	Company	
9371	Vedra Pointe Ln	
Addre	ess	
Boca	Raton, FL 33496	
City/S	State and Zip Code	
	tthomascpa@gmail.com	
E-ma	ail address: (to be used for future annu	al report notification)
For fu	urther information concerning this matter	; please call:
Tom 1	Thomas	31 ( 954 ) 592-2844
	Name of Contact Person	at (954 ) 592-2844 Area Code & Daytime Telephone Number
Enclo	osed is a \$35.00 check made payable to th	ne Department of State.
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of ch	ange is submitted for a corporati	617.0502, 607.1508, or 617.1508, Florid on organized under the laws of the State of	of Florida
		or registered agent, or both, in the State o	oj rioriaa.
	the corporation: Bradford Marine		
2. The principa	l office address: 1900 W. Oakland	Park Divd	
3. The mailing	address (if different): 1900 W. O	akland Park Blvd, PO Box 9945, Oakland P	ark, FL 33310
		Document number: <u>30478</u>	
5. The name an		gistered agent and registered office on file	
	Kathleen Nitabach C/O Daszkal	Bolton LLP	
	2401 NW Boca Raton Blvd		
	Boca Raton, FL 33431		
6. The name an (if changed):		ered agent (if changed) and /or registered	office
	Tom Thomas, CPA		
	9371 Vedra Pointe En		C.D.
	P.O. Box, NOT acceptable		
	Boca Raton, FL 33496	<del>-</del>	5; 5;
The street addras changed wil	ress of its registered office and t I be identical.	he street address of the business office of	of its registered agont.
Such change wanthorized by	as authorized by resolution duly the board, of the corporation has	adopted by its board of directors or by been notified in writing of the change.	an officer so
	el Coff	Paul Engle, Director	
-	ure of an officer or director	Printed or typed name at	nd title
I further agree of my duties, a document is he	If the appointment as registered to comply with the provisions of and lam familion with and accepting filed merely to reflect a chast been notified in writing of this	agent and agree to act in this capacity, f all statutes relative to the proper and c t the obligation of my position as registe nge in the registered office address, I he change.	complete performance ared agent. Or, if this reby confirm that the
W	Mount	04/06/2020	
Si	gnature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
Tom Thomas			
	Typed or Printed Name	<del>_</del>	

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