(Requestor's Name)				
(Address)				
(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				
AUG - 4 2023				
Office Use Only				



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06/20/23--01025--002 \*\*35.00

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJE	CT: Odyssey Marine Entertainment, Inc.	
Name o	of Corporation	
DOCU:	MENT NUMBER: EB2000005778.	05000002360
The end	closed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please r	return all correspondence concerning this	s matter to the following:
	· -	<u>-</u>
Susan F	ennessey	
Name o	of Contact Person	
Odyssey	y Marine Exploration, Inc.	
Firm/Co	ompany	
205 S. I	loover Blvd., Suite 210	
Address	s	
Tampa,	FL 33609	
City/Sta	ate and Zip Code	
	sfennessey@odysseymarine.	com
E-mail	address: (to be used for future annua	l report notification)
For furt	ther information concerning this matter,	please call:
Susan F	ennessey	at (813 )876-1776
	Name of Contact Person	at (813 )876-1776  Area Code & Daytime Telephone Number
Enclose	ed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address:
		Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	I has gettle to the fact of T	Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation or	.0502, 607.1508, or 617.1508, Florida Statutes, rganized under the laws of the State of Nevada gistered agent, or both, in the State of Florida.	, this	
1. The name of t	the corporation: Odyssey Marine Ente	ertainment, Inc.		
2. The principal	office address: 205 S. Hoover Blvd., S	Suite 210, Tampa, FL 33609		
3. The mailing a	ddress (if different):			
4. Date of incorp	Document number: F05000002360			
	I street address of the current register tment of State: (If resigned, enter res	ed agent and registered office on file with the igned)		
	Laura L. Barton			
205 S. Hoover Blvd., Suite 210				
Tampa, FL 33609				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Susan Fennessey				
	P.(	), Box NOT acceptable	25.5 25.5 25.5 25.5 25.5 25.5 25.5 25.5	
The street addreas changed will	ess of its registered office and the stube identical.	reet address of the business office of its regist	ere agent!	
Such change wa authorized by th	as authorized by resolution duly adone board, or the corporation has been	pted by its board of directors or by an officer n notified in writing of the change.	so <b>S</b>	
4		Susan Fennessey, Secretary  Printed or typed name and title		
l further agree i of my duties, an docúment is bei	the appointment as registered agen to comply with the provisions of all an familiar with and accept the ng filed merely to reflect a change is been notified in writing of this cha	t and agree to act in this capacity, statutes relative to the proper and complete p obligation of my position as registered agent n the registered office address, I hereby confi	erformance . Or, if this rm that the	
		6/6/2023		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
T	yped or Printed Name			

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