

F 06 000003200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/28/13--01009--031 **35.00

R/A Chg

FEB 01 2013

R. WHITE

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13 JAN 28 AM 9:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Carib Queen Ltd
Name of Corporation

DOCUMENT NUMBER: F06000003200

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:

Paula Finch

Name of Contact Person

Schwarz Partners, LP

Firm/Company

5505 W 74th ST

Address

Indianapolis, IN 46268

City/State and Zip Code

pfinch@schwarzpartners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paula Finch

Name of Contact Person

at 317 290-1140

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 290- _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Carlb Queen LTD
2. The principal office address: Trust Co, Complex Ajeltake Rd Ajeltake
Majuro, MI 96960
3. The mailing address (if different): 5505 W 74th St
Indianapolis, IN 46268
4. Date of incorporation/qualification: April 17, 2006 Document number: F06000003200
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)

Jack W Schwarz

540 Harbor Point Road

Longboat Key, FL 34228

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

NRAI

515 East Park Ave

P.O. Box NOT acceptable

Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.


Signature of an officer or director

John W Schwarz President
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.

Asst Secretary
Signature of Registered Agent

1-21-13
Date

If signing on behalf of an entity:

Jim Probst Asst. Secretary
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)