F07000006658

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000134242 3)))

H13000134242 3ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

FILED
13 JUN 13 PM 1:43
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED
13 JUN 13 AM 8:47
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE
SEAWORTHY INSURANCE COMPANY

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$35.00

Electronic Filing Menu Corporate Filing Menu Help

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Seaworthy Insurance Company
Name of Corporation

DOCUMENT NUMBER: F09000000658

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:

Blanca Dulanto
Name of Contact Person

Boat America Corporation
Firm/Company

880 S. Pickett Street
Address

Alexandria, VA 22304
City/State and Zip Code

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

For further information concerning this matter, please call:

Blanca Dulanto at (703) 461-2878
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

CR2E045 (01/12)

6/13/2013 9:33:22 From: To: (850) 617-6380 Page 3/3

SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JUN 13 PM 1:43

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 Maryland *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: *Seaworthy Insurance Company*

2. The principal office address: 147 OLD SOLOMON'S ISLAND RD. Suite 513
ANNAPOLIS, MD 21401

3. The mailing address (if different): 880 S. Pickett St., Alexandria, VA 22304

4. Date of incorporation/qualification: 02/18/2009 Document number: P09000000558

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)

Virginia Fletcher

6255 LAKE GRAY BLVD. Suite 4

JACKSONVILLE, FL 32244

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

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road
P.O. Box NOT acceptable

Plantation, Florida 33324

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.

James B Holler — James B. Holler (President)
Signature of an officer or director — 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.

C T Corporation System
By: — 6/12/13
Signature of Registered Agent — Date

Marc St. Pierre
If signing on behalf of an entity: Vice President and Assistant 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)

FL006 - 03/20/2013 Wolters Kluwer CCH