



**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PrestoMarine of Sweden Inc  
Name of Corporation

**DOCUMENT NUMBER:** F15000001935

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:

Ann-Louise De Voe  
Name of Contact Person

PrestoMarine of Sweden Inc  
Firm/Company

5640 Lotus Ct  
Address

Grove City, OH 43123  
City/State and Zip Code

ann-louise@prestomarine.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ann-Louise De Voe at ( 614 ) 400-6396  
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: PrestoMarine of Sweden Inc
2. The principal office address: 5640 Lotus Ct, Grove City, OH 43123
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 04/30/2015 Document number: F15000001935
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)

Randy Abraham  
28163 Islet Trail  
Bonita Springs, FL 34135

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

Randy Abraham  
28101 Cetation Way  
P.O. Box NOT acceptable  
Bonita Springs, FL 34135

FILED  
15 AUG 24 AM 8:10  
TALLAHASSEE, FLORIDA

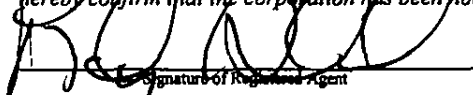
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Mikael Johansson, 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.*

  
Signature of Registered Agent

2015 08 07  
Date

If signing on behalf of an entity:  
Randy Abraham  
Typed or Printed Name

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