

F1800000 3321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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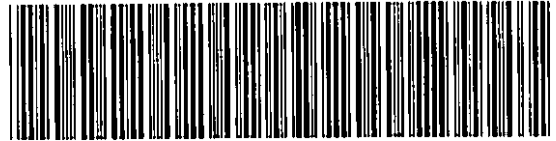
(Business Entity Name)

(Document Number)

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2019 JAN 14 PM 5:00  
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CIVIL JUSTICE DIVISION

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JAN 18 2019  
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Blue Island Oyster Company, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F18000003321

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:

Lauren Barton

Name of Contact Person

Blue Island Oyster Company, Inc.

Firm/Company

PO Box 31

Address

West Sayville, NY 11796

City/State and Zip Code

laurenb@blueislandoysters.com

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

For further information concerning this matter, please call:

Lauren Barton

Name of Contact Person

at ( 631 ) 563-1330

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

1. The name of the corporation: Blue Island Oyster Company, Inc.

2. The principal office address: 136 Atlantic Ave, West Sayville, NY 11796

3. The mailing address (if different): PO Box 31, West Sayville, NY 11796

4. Date of incorporation/qualification: July 20, 2018 Document number: F18000003321

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)

John O'Connell

2725 NE 14th Street Causeway Suite 6

Pompano Beach, FL 33062

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

John O'Connell

32 Camden Drive, Apt 1

P.O. Box NOT acceptable

Bal Harbour, FL 33154

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

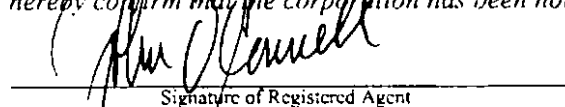
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

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. On of 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

12/28/18  
Date

If signing on behalf of an entity:

John O'Connell

Typed or Printed Name

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