Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

Account Name

: UNITED AGENT GROUP INC.

Phone

Account Number : I20160000086

: (561)508~5033

Fax Number

; (561)694-1639

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

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REGISTERED AGENT CHANGE BOSTON WHALER, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

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Electronic Filing Menu

Corporate Filing Menu

Help

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

| Pursuant to the provisions of sections 607.0502, 617.0502 statement of change is submitted for a corporation organi | 2. 607.1508, or 617.1508, Florida Statutes, | this |
|---|--|-----------------------------------|
| in order to change its registered office or registe | red agent, or both, in the State of Florida. | - |
| 1. The name of the corporation: Boston Whaler, Inc. | ŕ | |
| 2. The principal office address: 100 WHALER WAY, 412 | U.S. HIGHWAY 1, EDGEWATER, FL 321 | 141 |
| 3. The mailing address (if different): 26125 N. Riverwoods | Blvd., Suite 500, Mettawa, IL 60045 | |
| 4. Date of incorporation/qualification: 05/21/1996 | Document number: F96000002538 | |
| The name and street address of the current registered agreement of State: (If resigned, enter resigned) | ent and temistered office on 61s with 45s | |
| C T CORPORATION SYSTEM | | |
| 1200 SOUTH PINE ISLAND ROAD | | |
| PLANTATION, FL 33324 | | |
| 6. The name and street address of the new registered agent (if changed): | (if changed) and /or registered office | |
| United Agent Group Inc. | | |
| 801 US Highway 1 | | 2. |
| | OT acceptable | <u>-:</u> |
| North Palm Beach, FL 33408 | · | |
| The street address of its registered office and the street ad as changed will be identical. | dress of the business office of its registere | d agent |
| Such change was authorized by resolution duly adopted by authorized by the board, or the corporation has been notifi | y its board of directors or by an officer so ed in writing of the change. | PH 12: 30 |
| 1 (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | Danielle Gossman - Attorney-in-Fact | 3 6 |
| I hereby accept the approintment as registered agent and a I further agree to comply with the provisions of all statutes of my duties, and I am familiar with and accept the obligated document is being filed merely to reflect a change in the recorporation has been notified in writing of this change. | rnnted or typed name and title gree to act in this capacity, s relative to the proper and complete perfo tion of my position as registered agent. O egistered office address, I hereby confirm | ormance r, if this that the |
| (\mathbf{x}, \mathbf{V}) | Jay 14, 2021 | |
| If signing on behalf of an entity: | Date | |
| Danielle Gossman, Special 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 (04/13)