G73361

(Requestor's	Name)			
(Address)				
(Address)				
(City/State/Zip	o/Phone #)			
PICK-UP W	AIT MAIL			
(Business En	tity Name)			
(Document Number)				
Certified Copies Cer	tificates of Status			
Special Instructions to Filing Officer:				
RA Signatur	<i>و</i> ــ			

Office Use Only



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De Leo & Kuylenstierna P.A.

Attorneys at Law

Charles G. De Leo Jan M. Kuylenstierna Ryon L. Little Town Center One Suite 1710 8950 SW 74th Court Miami, Florida 33156 Telephone: 786-332-4909 Fax: 786-518-2849 www.dkmaritime.com

January 31, 2023

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

RE: Statement of Change of Registered Office or Registered Agent or Both for

Corporations

Corporation: Martainer, Inc. Document no.: G73361

Dear Sir/Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Martainer, Inc., and a check in the amount of \$35.00 payable to the Florida Department of State.

Please advise whether you need any additional information to process the change.

Sincerely,

Jan M. Kuylenstierna

Enclosures

SECRETARY OF STATE

COVER LETTER

то:	Amendment Section Division of Corporations			
SUBJ	ECT: Martainer, Inc.	_		
Name	of Corporation			
DOCU	UMENT NUMBER: G73361	_		
The er	nclosed Statement of Change of Registered Office/Agent and fee are submitted for f	līling.		
Please	return all correspondence concerning this matter to the following:			
lun M	. Kuylenstierna			
	of Contact Person			
	o & Kuylenstierna, P.A.			
	Company			
	SW 74th Ct., Suite 1710			
Addre				
Miami	i, Florida 33156			
City/S	tate and Zip Code			
	franco@ kingocean.com			
E-mai	il address: (to be used for future annual report notification)	-		
		ଜ୍ୟ	20	
hor lu	rther information concerning this matter, please call:	12.C	23	4365
Jan M.	rther information concerning this matter, please call: . Kuylenstierna at (786) 258-3761 Name of Contact Person Area Code & Daytime Telep		PR	i ••
	Name of Contact Person Area Code & Daytime Tele	phone Nun	ī ₼ਊ≥ _	versa.
		(6-K)		
Enclos	sed is a \$35.00 check made payable to the Department of State.	50 A 10 to	AH C	
		237		
	Mailing Address: Street Address:	1 1-1	S	
	Amendment Section Amendment Section			

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327



April 17, 2023

JAN M. KUYLENSTIERNA - DE LEO & KUYLENSTIERNA P.A. TOWN CENTER ONE, SUITE 1710 8950 SW 74TH COURT MIAMI, FL 33156

SUBJECT: MARTAINER, INC.

Ref. Number: G73361

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 623A00008609

Darlene Connell
Regulatory Specialist II Supervisor

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

statement of chang	ovisions of sections 607,0502, 617,0502 wis submitted for a corporation organ o change its registered office or registe	ized under the laws of the State of Flo	orida	
	corporation: Martainer, Inc.			
	Tice address: 13155 NW 19th Lane, Swee			
3. The mailing add	lrèss (if different):			
4. Date of incorpor	ration/qualification: December 5, 1983	Document number: G73361		
5. The name and s	treet address of the current registered agent of State: (If resigned, enter resigne	gent and registered office on file with		
(arlos Perdomo			
	1000 NW 29th St., Suite 201			
N	flami, Florida 33172			
6. The name and s (if changed):	treet address of the new registered agen		:e	
(harles G. Del.eo			
8	950 SW 74th Ct., Swite 1710			
	P.O. Bos Himmi, Florida 33456	NOT acceptable		
The street address as changed will be	of its registered office and the street and the street	address of the business office of its	registered (ngent.
Such change was authorized by the	authorized by resolution drily adopted board, or the corporation has been not	by its board of directors or by an or lifted in writing of the change.	llicer≨q —(i''i	2023 AP
- Summer	I in allicer or director	Franco Da Costa Gomez - CFO Printed iv typed name and inte	CRE	AP "1
	e appointment as registered agent an comply with the provisions of all statt I om familiar will, and accept the abli tiled merely to reflect a change in th een notified in writing of this change.	•	1.7	Nance of this contains
	Mol	October 5, 2022		<u>~</u> ਲਂ ,,,,,
*(crain	ute of Regulated Agent	Date	7.43	क
If signing on beha	If of an entity:			
Type	d or Printed Name			

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TAILAHASSEE, Ft. 32314 CR2E045 (04/13)