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SECRETARY OF STATE

T. CLINE

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**EXAMPLER** 

## **COVER LETTER**

10.	Division of Corporations				
SUBJ	ЕСТ:	Luxury Y	acht Group	, LLC	***************************************
	Nan		d Liability Cor		
Dear S	Sir or Madam:				
The e	nclosed Registered Agent/Regist	ered Office	Change and fe	e(s) are submitte	ed for filing.
Please	return all correspondence conce	erning this n	natter to the fol	llowing:	
	Rupert Connor Name of Person	···			
	Luxury Yacht Group, Firm/Company	LLC.			2012 JA SECRE
	1362 SE 17th Stre	eet			2012 JAN -3 PM 1: 48 SECRETARY OF STATE ALL AHASSEE, FLORIDA
	Fort Lauderdale, FL 3 City/State and Zip Code	33316			ORION STATE
E-	rc@luxyachts.cor	n report notificati	on)		
For fu	rther information concerning this	s matter, ple	ase call:	-	
	Rupert Connor	at (_	954 )	525 - 9	959
	Name of Person		Area Coo	le & Daytime Telepho	one Number
	STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	S:	Registration of P.O. Box 6	Corporations	
	Enclosed is a check for the fo	llowing am	ount:		
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	Luxury Yacht Group, LLC.		
. (a) Principal office address of limited liability company:			
(Note: MUST BE STREET ADDRESS)	1362 SE 17th Street Fort Lauderdale, FL 33316		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)	1362 SE 17th Street Fort Lauderdale, FL 33316		
June 13, 2001	L0100009794		
3. Date of filing/registration in Florida	4. Document number $\frac{8}{50}$ $\frac{2}{50}$		
5. (a) Registered Agent and Registered Office shown			
Registered Agent:	Rupert Connor		
Registered Office Address:	1740 NW 107th Way 55 15 Plantation, FL 33322		
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>N</b>			
NEW Registered Agent:	Rupert Connor		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1362 SE 17th Street Fort Lauderdale ,FL 33316		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change of the company is the confirmed that the change of the company is the liability company.	he laws of the State of Florida, it is hereby e Florida street address of the registered office entical. Or, in the case of a Florida limited		
or the operating agreement of the limited liability company or as of	herwise provided in the articles of organization		
Signature of a member or authorized representative of a member			
Rupert Connor Printed or typed name of signee			
I hereby accept the appointment as registered agent an comply with the provisions of all statules relative to the and I am familiar with and accept the obligations of my Chapter 608. F.D. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.		
Signature of Registered Agent			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00