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	, 5,	Division of Corporations Fax Number : (850)617-6383		II AVII	
1:29	From:	Account Name : UNITED AGENT GROUP INC. Account Number : I20160000086 Phone : (561)508-5033	YOF STAT	PH 4: to	
¥.	Maria Maria Maria	Phone : (561)508-5033 Fax Number : (561)694-1639	· ·		

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

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## LLC REGISTERED AGENT CHANGE FREEDOM BOAT CLUB LLC

Certificate of Status	0
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Page Count	02
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Electronic Filing Menu

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Help State Lace

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1. N	ame of the limited liability company: FREEDOM BOA	T CLU	ВL	LC			
2. (a)	807 F. Venica Ave		(b)	26125 N. R	iverwoods Blvd.		
(-)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	(0)	Ma	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Venice, FL 34285			Mettawa, IL	60045		
	04/22/2003		Į	.0300001436	4		
3. 5. (a)	Date of filing/registration in Florida CT CORPORATION SYSTEM	4.	_	D	ocument number		
	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	Dept. of State:	202 3.5				
	Registered Office Address (MUST BE FLORIDA STREET)						
	PLANTATION ,FL 33324						
(b)	Enter name of NEW Registered Agent and/or NEW Registered United Agent Group Inc.		PH 4: 49				
	NEW Registered Office Address:	_					
	801 US Highway I						
	North Palm Beach , FL	33408		<del></del> -			
change agent v was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of idles of organization or the operating agreement of the	registe bility of f the lis	red om mit	office and to pany, it is he ad liability of	he business office of the registered ereby confirmed that the change(s) company or as otherwise provided in		
					ssman - Attomey-in-Fact		
I here provisi the obl to mero notified	nure of a member or substituted representative of a member by accept the appointment as registered agent and agro ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.  Danielle Gossman, Specie ce of Registered agent			this capaci ce of my dut apter 605, F firm that the	rinted or typed name of signee ity. I further agree to comply with the ties, and I am familiar with and accept i.S. Or, if this document is being filed I limited liability company has been		