[04000/2521

(Re	questor's Name)	<u></u>
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K.SALY EXAMINER AUG 28 2012

COVER LETTER

TO: Registration Section Division of Corporations		
	o's Cruises, LLC	
Name of Lim	ited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Dimitries Theodosiau		
Dimitrios Theodosiou Name of Person	·	
Theo's Cruises, LLC Firm/Company		
1 tills Congrany		
P.O. Box 294		
Address		
Key Largo, Florida 33037		
City/State and Zip Code		
ReneeTheodosiou@bellsouth.net		
E-mail address: (to be used for future annual report notifi	ication)	
For further information concerning this matter,	please call:	
Dimitrios Theodosiou a	t (305) 522-4038	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following	amount:	
\$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:	Theo's Cruises, LLC
2. (a) Principal office address of limited liability co	ompany: 134 Poinsetta Drive
(Note: MUST BE STREET ADDRESS)	Key Largo, Florida 33037
(b) Mailing address of limited liability company	
(Note: MAY BE POST OFFICE BOX)	Key Largo, Florida 33037
2/12/2004	L04000012521
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho Registered Agent:	~ co
Registered Office Address:	99198 Overseas Highway, Suite 8 Key Largo, Florida 33037
(b) Enter name of <u>NEW Registered Agent</u> and/ <u>NEW</u> Registered Agent:	or <u>NEW Registered Office address</u> : <u>Dimitrios Theodosiou</u>
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRES.	134 Poinsetta Drive
	Key Largo ,FL 33037
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the chof the members of the limited liability company or a or the operation agreement of the limited liability company or a Signature of a member or authorized representative of a member	e, the Florida street address of the registered office to identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote is otherwise provided in the articles of organization
Dimitrios Theodosiou Printed or typed name of signee	
I hereby accept the appointment as registered agen comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F. M. Or, if this document is being file address, I hereby confirm that the limited liability c	t and agree to act in this capacity. I further agree to the proper and complete performance of my duties, f my position as registered agent as provided for in d to merely reflect a change in the registered office ompany 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