## #1204000031802

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)	·	
PICK-UP WAIT	/AIL	
(Business Entity Name)		
(Document Number)		
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
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——————————————————————————————————————	ce Boat Lifts, L.L.C. Limited Liability Company
Name of 1	Elimica Elability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Kristy_Tingle	
Name of Person	
Ace Boat Lifts, L.L.C. Firm/Company	
2211 S. Tamiami Trail Address	<del></del>
Venice, FL 34293 City/State and Zip Code	<del></del>
kristytingle@comcast.net E-mail address: (to be used for future annual report n	otification)
For further information concerning this matter	er, please call:
Kristy Tingle	at ( <u>941</u> ) <u>493-8100</u>
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	g 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:	Ace Boat Lifts, L.L.C.	
2. (a) Principal office address of limited liability compan	y: Ace Boat Lifts.	
(Note: MUST BE STREET ADDRESS)	2211 S. Tamiami Trail Venice, FL 34293	
(b) Mailing address of limited liability company:	Ace Boat Lifts, L.L.C.	
(Note: MAY BE POST OFFICE BOX)	2211 S. Tamiami Trail Venice, FL 34293	
4/26/2004	L04000031802	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	Kenneth D. Doerr	
Registered Office Address:	22 Links Ave., Ste 300 Sarasota, FL 34236	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	Kristy Tingle	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Ace Boat Lifts 2211 S. Tamiami Trail Venice ,FL34293	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member		
Knista S. Tinak		
Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my por Chapter 608, F.S. Or, if this document is being filed to me address. I hereby confirm that the limited liability compan	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.	

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

Signature of Registered Agent