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## COVER LETTER

Division of Corporations	
SUBJECT: Marine Holdings II LLC (Name o	f Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
Leslie N. Reizes, Esq.	
(Name of Person)	
Reizes Law Firm, Chartered	
(Firm/Company)	•
1177 George Bush Boulevard, Suite 3	308
(Address)	
Delray Beach, FL 33483	•
(City/State and Zip Code)	<del></del>
For further information concerning this ma	atter, please call:
Leslie N. Reizes	at (561 ) 276-2600
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the follow	ving amount:
<b>✓</b> \$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.

1. The name of the lim	ited liability compa	any is: Marine Holdin	ngs II LLC			·
2. The mailing address	of the limited liab	ility company is : 9	61 Iris Drive, Delra	y Beach, FL	33483	<u></u> -
05/04/2004			L04000033938			···································
3. Date of filing/regist	ration in Florida	<del></del>	4. Document nun	nber		
5. The name of the regin Florida Department	stered agent and th	e registered office a	address as shown (	on the record	ds of th	ıe
,	Harold P. Lee	<b>!</b>				
		Name				
	7531 S. Oriole					
	Dalass Danah	Address				
	Delray Beach,	City, State and Zip	<u> </u>			
6. The name and address	ss of the new regist	•	•		OG DEC	DISIVIO
	Sharon Baker					≅R 0∃
	961 Iris Drive	Name		-	IS PH	FILEC ARY O F CORI
	Florida street a	address (P.O. Box N	NOT acceptable)		· #	Y OF STAT CORPORATION
	Delray Beach	FL 33483	3		36	LIONS LE
		City, State and Zip				ಶ
If the limited liability confirmed that after the and the business office liability company it is of the members of the or the operating agreement.	change or changes	s are made, the Flor ent will be identica	ida street address	of the regist	tered of	fice t
(Signature of a member or aut	horized representative of	a member)				
Guenther Moeckesch			•			
(Printed or typed name of sign	ee)					
I hereby accept the app comply with the provisi and I am familiar with Chapter 608, F.S. Or, address, I hereby confi	Delle	ered agent and agricelative to the prope gations of my posit Being filed to merel liability company h	ee to act in this ca er and complete pe jon as registered a y reflect a change as been notified ir	pacity. I fur erformance igent as pro in the regis writing of i	rther ag of my a vided fo tered o this cha	tree to luties, or in lfice inge.
(Signature of Registered Agen	1//	<del>-</del>			,	
/Divi	sion of Cornoratio	ns. P.O. Box 6327	. Tallahassee, FL	. 32314		

**FILING FEE: \$25.00**