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(Requestor's Name)						
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						

Office Use Only



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MAY 1 8 2017 S. YOUNG SECRETARY OF STATES
TALLAHASSEE FLORIDA
13 HAY 17 PH 3: 16



450 Basin Street • Daytona Beach, Florida 32114 • Office: (386) 255-0744 • FAX: (386) 253-8842

PLEASE NOTE THAT WE ARE TRYING TO REMOVE **WILLIAM EVE** FROM THIS LLC, AS REGISTERED AGENT, THE ONLY ENTITY ON HERE SHOULD BE **RONALD O STOKKE**. FORM WAS SLIGHTLY CONFUSING.

CALL ME IF THERE ARE ANY QUESTIONS.

KAREN 386-255-0744

Thanks !!

TALLAHASSEET - 16

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	YACHT BROKERS AT HALIFAX HARBOR MARINA					
	Name of	Limited Liab	ility Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Office C	hange and fe	e(s) are submitted for filing.			
Please	return all correspondence concerning this ma	atter to the fol	llowing:			
KARE	EN CORTER					
	Name of Person					
YACH	HT BROKERS HALIFAX HARBOR					
	Firm/Company					
450 E	BASIN ST		:			
	Address		•			
DAYI	TONA BEACH FL 32114					
	City/State and Zip Code	-	,			
KARE	EN@DAYTONAYACHTS.COM					
Е	E-mail address: (to be used for future annual r	eport notifica	ition)			
For fur	rther information concerning this matter, plea	ise call:				
KARE	EN CORTER at	386	255-0744			
-	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	Regis Divis P.O. I	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314			
Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	\$55	Filing Fee & Certified Copy			

INHS18 (2/14)

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.	Na	me of the limited liability company: YACHT BROK	ERS	<u> </u>	T HALIFA	X HARBOR MARINA
2. (a	a)	RONALD O STOKKE	(b)		
`	_	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- `	. ,	М	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		450 BASIN ST				(TWIE. MAT BE TOST OFFICE BOA)
		DAYTONA BEACH FL 32114	_			
		05/04/2004		L	_04000034	4000
3.		Date of filing/registration in Florida	4.		1	Document number
5. (a)	RONALD O STOKKE		٠		•
·		Registered Agent and Registered Office shown on the records of th	e Floric	la I	Dept. of State:	
		A COURT DE DI CONTROL	D D D C C			
		Registered Office Address (MUST BE FLORIDA STREET AL 450 BASIN ST	<u>DDKES</u>	3)		· = =
						
		DAYTONA BEACH , FL	32114	1 		A AREA
(b)	~)	RONALD O STOKKE				ECRETARY ELAHASSE MAY 17
(,	,	Enter name of NEW Registered Agent and/or NEW Registered C	office a	dd	ress:	R mai
						S OR
		NEW Registered Office Address:				5 5 m
		.FL				
the dagen	ha it v 'we	imited liability company is not organized under the laws ange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	he reg pility c the lir mited	ist cor mi lia	tered office npany, it is ted liability ability comp	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
	_		RO	<u>۱</u>	NALD O S	
_		ture of a member of authorized representative of a member	a to c	a .		Printed or typed name of signee
prov the c	isi obl ere	by accept the appointment as registered agent and agre ions 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 he d in writing of this change.	e to ac erforn for in ereby c	ei i na Ci coi	in this capa nce of my d hapter 605, nfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
Sign	atu	re of Registered Agent				