L040000040038

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(6.1,75.11.15.12,17.11.11.17.)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
L. SELLERS		
JAN 14 2009		
EXAMINER		

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Salt Creek Marina, LLC	;
	of Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered (Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	z this matter to the following:
	,
Janet Seaton (Name of Person)	
(Marie of Ferson)	
Salt Creek Marina, LLC	
(Firm/Company)	
PO Box 10210 (Address)	
,	
Fort Smith AR 72917	·
(City/State and Zip Code)	
For further information concerning this matt	ter, please call:
Janet Seaton	at (479) 783-0209
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following	ng 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.

1. Name of the limited liability company: Salt Creek N	Marina, LLC	
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 5871 Gulf of Mexico Drive	
(NOOT MEET DE BINESE)	Longboat Key Florida 34228	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	PO Box 10210 Fort Smith AR 72917	
06/18/2004	<u>L04000046038</u>	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Registered Agent:	Ernest L. Mascara	
Registered Office Address:	721 First Avenue North	
	St. Petersburg, FL 33701	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:	
<u>NEW</u> Registered Agent:	Charles Palmer	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5871 Gulf of Mexico Drive	
(MUSI BE FLORIDA STREET ADDRESS)	Longboat Key,FL_34228	
If the limited liability company is not organized under the limited that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the call hereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	address of the registered office and the business use of a Florida limited liability company, it is an affirmative vote of the members of the limited	
Charles Palmer (Printed or typed name of signee)	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro- am familiar with and accept the obligations of my position F.S. Or if this document is being filed to merely reflect a c confirmation the limited liability company has been notified	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.	
Signature of Registered Agent)		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		