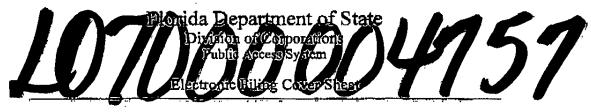
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Division of Corporations

Fax Number : (850)617-6380

Account Name : BARNETT, BOLT, KIRKWOOD,

Account Number : 072731001155 Phone : (813)253-2020

Frone : (813)253-2020 Fax Number : (813)251-6711

## REGISTERED AGENT CHANGE

## MID-ATLANTIC YACHTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

D. BRUCE

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## 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: Mid-Atlantic Yachts, LLC		
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 11600 Dr. Martin Luther King, Jr, Street N St. Petersburg, FL 33716	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	11600 Dr. Martin Luther King, Jr. Street N St. Petersburg, FL 33716	
1/12/07	L07000004757	
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	
Registered Agent:	David H. Redden	
Registered Office Address:	11207 Blue Heron Blvd, N St. Petersburg, FL 33716	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	David H. Redden	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	11600 Dr. Martin Luther King, Jr. Street N  St. Petersburg ,FL 33716	
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) 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.  X  (Signature of a member or authorized representative of a member)		
David H. Redden, Authorized Representative (Printed or typed name of signes)  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my position F.S. Or, if this document is being filled to merely reflect a confirm that the limited liability to the pany has been notified to (Signature of Registered Agent)	agree to act in this capacity. I further agree to roper and complete performance of my dylies, and I nas registered agent as provided for in Chapler 608, change in the registered office address, I hereby ed in writing of this change.	

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

INHS18 (05/08)

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