

L07000034060

(Requestor's Name)

(Address)

(Address)

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EXAMINER



200183933382

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10 AUG - 5 AM 10:45
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

FILED
10 AUG - 5 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 469226 7169688

AUTHORIZATION

Spurlockman

COST LIMIT : \$ 25.00

ORDER DATE : August 4, 2010

ORDER TIME : 4:34 PM

ORDER NO. : 469226-005

CUSTOMER NO: 7169688

CHANGE OF AGENT

NAME: METOCEAN DATA SYSTEMS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER: _____

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: METOCEAN DATA SYSTEMS, LLC

2. (a) Principal office address of limited liability company: 6538 Collins Avenue, Suite 260



(Note: **MUST BE STREET ADDRESS**)

Miami Beach, FL 33141

(b) Mailing address of limited liability company:



(Note: **MAY BE POST OFFICE BOX**)

6538 Collins Avenue, Suite 260

Miami Beach, FL 33141

March 29, 2007

3. Date of filing/registration in Florida

L07000034060

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Tony Chedrawy

Registered Office Address:

6538 Collins Avenue, Suite 260

Miami Beach, FL 33141

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

Devine Goodman Rasco & Wells, P.A.

NEW Registered Office Address:

777 Brickell Avenue

(MUST BE FLORIDA STREET ADDRESS)

Suite 850

Miami, FL 33131

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.

Tony Chedrawy
Signature of a member or authorized representative of a member

Tony Chedrawy

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Tony Chedrawy
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA
DEPT. OF STATE

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