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EXAMINER



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SECRETARY OF STATE DIVISION OF CORPORATIONS



COVER LETTER

TO: Registration Section Division of Corporations	
• •	
SUBJECT: Atlantic Yachts LLC	
(Name o	of Limited Liability Company)
Dear Sir or Madam:	
Dear Sir or Madain.	
The enclosed Registered Agent/Registered O	office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
•	-
Paul Madden (Name of Person)	
(mane of relatin)	
Paul Madden Associates Co.	
(Firm/Company)	
	•
4576 Pebble Bay So (Address)	
(Address)	
Vero Beach Fl 32963	
(City/State and Zip Code)	
For further information concerning this matter	er, please call:
Paul Madden	at (561) 568-3430
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, Florida 32301	Tallahassee, Florida 32314

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

☑ \$25 Filing Fee

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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.

1. Name of the li	mited liability company: Atlantic Ya	achts LLC	
2. (a) Principal ((<i>Note: M</i>	office address of limited liability compa	any: 4576 Pebble Bay So Vero Beach Fl 32963	
(b) Mailing a (Note: M	ddress of limited liability company: MAY BE POST OFFICE BOX	4576 Pebble Bay So Vero Beach, Fl 32963	
2/28/2008		L08000021630	
3. Date of filing/	registration in Florida	4. Document number	
5. (a) Registere	d Agent and Registered Office shown	on the records of the Florida Dept. of State:	
Registere	d Agent:	Paul Madden Associates. Co.	÷
Registere	d Office Address:	235 Montant Dr Delam Beach Gardens, Fl 33410 Section 575	
(b) Enter nam	ne of NEW Registered Agent and/or N	 	
<u>NEW</u> Re	gistered Agent:	Paul Madden Associates, Co.	
<u>NEW</u> Re <u>(MUST L</u>	gistered Office Address: BE FLORIDA STREET ADDRESS)	4576 Pebble Bay So	
		Vero Beach "FL32963.	
that after the cha	nge or changes are made, the Florida s stered agent will be identical. Or, in the d that the change(s) was/were authorized or as otherwise provided in the article	the laws of the State of Florida, it is hereby confirmed treet address of the registered office and the busines he case of a Florida limited liability company, it is ed by an affirmative vote of the members of the limites es of organization or the operating agreement of the	S
limited liability of	er dr authorized representative of a member)	<u>-</u>	
(Signature of protection) (Signature of protection) (Paul Madden (Printed or typed name)	er of signee)	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, and tion as registered agent as provided for in Chapter of the change in the registered office address, I hereby ified in writing of this change.	