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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
· · · · · · · · · · · · · · · · · · ·	E Boating LLC ted Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing
Please return all correspondence concerning this	matter to the following:
Lourio Mail	
Laurie Weil Name of Person	
E&E Boating LLC	
Firm/Company	CAH JUN -
	TILLAHASSEE.FLORID
238 Palermo Avenue Address	
Address	FEST
Coral Gables El 33134	DRITE
Coral Gables, FL 33134 City/State and Zip Code	
lweil@redbridge.cc E-mail address: (to be used for future annual report notific	ration)
For further information concerning this matter, p	
Edmund Santiago at	(305) 232-9040
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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following a	mount:
\$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.

Name of the limited liability company:	E&E Boating LLC	
2. (a) Principal office address of limited liability compa	ny: 238 Palermo Avenue	
(Note: MUST BE STREET ADDRESS)	Coral Gables, FL 33134	
(b) Mailing address of limited liability company:	E&E Boating LLC	
(Note: MAY BE POST OFFICE BOX)	238 Palermo Avenue Coral Gables, FL 33134	
3/21/2008	L08000029841	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	n the records of the Florida Dept of See:	
Registered Agent:	Xavier Suarez, Esq. 28	
Registered Office Address:	300 Sevilla Avenue	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:	
NEW Registered Agent:	Laurie Weil	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	238 Palermo Avenue Coral Gables ,FL33134	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote	
Edmund Santiago Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to maddress. I hereby confirm that the limited liability compa	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office any has been notified in writing of this change.	

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