





Electronic Filing Cover Sheet

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	Fax Number : (850)617-6383		
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Corporate Filing Menu

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M. SOLOMON

JUN 03 2019

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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 605.0114 or 605.0116, 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: FREEDOMMARINESALESILC

2. (a)	801E.VeniceAve.		01E.VeniceAve.		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	/ <u>_</u>	Mailing address of limite (Note: MAY BE POS	• • •	
	Venice,FL34285	·····	enice,FL34285		
	.) ( 117 ( ) ( 117 ( ) ( 117 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (				
	04/07/2008		8000035169		
3. - , ,	Date of filing/registration in Florida HOLMES,DAVIDA,,Esq.	4.	Document number		
5. (a)	Registered Agent and Registered Office shown on the records FARRLAWFIRM	ept. of State:			
	Registered Office Address <u>(MUST BE FLORIDA STREE</u> 99NL SBITSTREET	<u>TADDRESS)</u>		2 <b>819</b>	
	PUNEA GORDA	FL		ERET CRET	• •
(Ե)					
	Enter name of NEW Registered Agent and/or NEW Register			PH S S S S	11
	CTCorporationSystem			L Com	C
	NEW Registered Office Address:			214 W	
	1200SouthPineIslandRoad				
	Plantation	FL_ <u>33324</u>			

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.

/s/ David N. Swendsen	David N. Swendsen
Signature of a memberor authorized representative of a member	Printed or typed name of signee
<ul> <li>provisions of all statutes relative to the proper and compications of my position as registered agent as provid to mercly reflect a change in the registered office address, I write a writen a change in the registered office address, I</li> </ul>	pree to act in this capacity. I further agree to comply with the e performance of my duties, and Lam familiar with and accept ed for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited trability company has been S M. Halpin cant Secretary
Division of Corporations• P.O.	Box 6327• Tallahassee, FL 32314 FEE: \$25.00