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S. HAWKES

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EXAMINER

COVER LETTER

Division of Corporations		
	ERS JOURNAL LLC d Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing	
Please return all correspondence concerning this m	eatter to the following:	
SCOTT E ABOLAFIA		
Name of Person		
SCOTT E ABOLAFIA CPA PA		
Firm/Company		
0404 1101 1 2410 074 07		
9461 HOLLYHOCK CT Address		
DAVIE, FL 33328		
City/State and Zip Code		
scott@seacpa.com		
Scott@seacpa.com E-mail address: (to be used for future annual report notification)	on)	
For further information concerning this matter, ple	ase call:	
SCOTT E ABOLAFIA at (954) 294-3707 Area Code & Daytime Telephone Number	
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	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
-	<u>-</u>	

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: BOA	T BUILDERS JOURNAL LLC	
2. (a) Principal office address of limited liability company	7: <u> </u>	
(Note: MUST BE STREET ADDRESS)	9461 HOLLYHOCK CT DAVIE, FL 33328	
(b) Mailing address of limited liability company:	BOAT BUILDERS JOURNAL LEC	
(Note: MAY BE POST OFFICE BOX)	9461 HOLLYHOCK CT DAVIE, FL 33328	
JULY 03, 2008	L08000065041	
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 State:		
Registered Agent:	MICHAEL P MERKT	
Registered Office Address:	2050 N ANDREWS AVE EXT POMPANO BEACH, FL 33069	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	W Registered Office address: SCOTT E ABOLAFIA CPA PA	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	9461 HOLLYHOCK CT DAVIE ,FL 33328	
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.		
Signature of a member or authorized representative of a member	-	
Printed or typed name of signee	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provisions of all statutes relative to the provision and I am familiar with and accept the obligations of my post-chapter 608, F.S. Or, if this document is being filed to me address, I hereby comprim that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	