L09000036228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ocean Blue Yacht Sales, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul B. Boyd
Name of Person

Ocean Blue Yacht Sales, LLC
Firm/Company

c/o Fox, Wackeen, et al., 3473 SE Willoughby Blvd.
Address

Stuart, Florida 34994
City/State and Zip Code

bboydobys@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul B. Boyd at (772) 359-5547
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

CR2E145 (2/14)

AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

FIRST: The name of the limited liability company is: Ocean Blue Yacht Sales, LLC

SECOND: The Florida Document number of the limited liability company is: L09000036228

THIRD: The street address of the limited liability company's principal office is:

420 SW Federal Highway
Stuart, Florida 34994

The mailing address of the limited liability company's principal office is:

420 SW Federal Highway
Stuart, Florida 34994

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FOURTH: The date the statement of authority became effective is: 07/20/15

FIFTH: The statement of authority is cancelled.

OR

The amendment to the statement of authority is

The Statement of Authority dated 07/20/15 is reinstated.
Joseph Yeni did not have authority to cancel it.
The cancellation filed 11/04/15 is void and of no effect.

Signature of authorized representative

Paul B. Boyd, Sole Manager
Typed or printed name of signature

Filing Fee: $25.00
Certified Copy: $30.00 (optional)

CR2E145 (2/14)