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N. Culligan UCI - 6 2010

TO: Registration Section Division of Corporations

High Seas X, LLC

Name of Limited Liability Company

Dear Sir or Madam:

SUBJECT:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Byron Ellison Name of Person

Guinness Management Limited

Firm/Company

2962 Northwest 60th Street Address

Ft. Lauderdale, Florida 33309 City/State and Zip Code

BGEllison36@yahoo.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

6	1 582-5256)	954	at (Byron Eilison
6) 582-5256	×	054	-+ /	Byron Ellicon

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 amount:



\$55 Filing Fee & Certified Copy

INHS18 (5/08)

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:	High Seas X, LLC			
2. (a) Principal office address of limited liability comp	bany: 2962 Northwest 60th Street			
(Note: MUST BE STREET ADDRESS)	Et. Lauderdale, Florida 33309			
(b) Mailing address of limited liability company:	2962 Northwest 60tyh Street			
	Ft. Lauderdale, Florida 33309			
4 October 2010	L09000051361 5			
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:	Sydney D. Camper 🗧 💆			
Registered Office Address:	2831 Northeast 36th Street			

(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>:

NEW Registered Agent:	Byron Ellison		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2962 Northwest 60th Street		
	Ft. Lauderdale	,FL <u>33309</u>	

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.

alison

Signature of a member or authorized representative of a member

Byron Ellison

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

SEllecon Signature of Registered Agent

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