Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC REGISTERED AGENT CHANGE THE BOAT HOUSE OF CAPE CORAL, LLC

Certificate of Status	0
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Estimated Charge	\$55.00

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Corporate Filing Menu





To: 18506176383

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. N	ame of the limited liability company: The Boat House	of Cape	Coral, LLC	
2. (a)	1516 SF 46th St	ı	(b) 1516 SE 46	5th St.
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· ·		lailing address of limited liability company: (Note: MAY BE POST OFFICE ROX)
	Cape Coral, FL 33904	_	Cape Coral.	FL 33904
	09/24/2009	 -	1.090000925	58
3.	Date of filing/registration in Florida C T Corporation System	4.]	Document number
5. (a))	1 - 121 - 1	1 5 . 60.4	
	Registered Agent and Registered Office shown on the records of 1200 South Pine Island Road	the Flon	da Dept. of State	
	Registered Office Address (MUST RE FLORIDA STREET	ADDRE.	55)	
	Plantation, F	33324 L		
(b)	Parker Valdez			2021 SEC TA
	Enter name of NEW Registered Agent and/or NEW Registered	d Office i	ddress:	POZI MAY 21 SECRETARY TALLAHA
	1516 SE 46th St.			S C
	NEW Registered Office Address:			PH 3:1
	Cape Coral , FI	33904 L		ार्ग Æ
change agent was/w	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- vere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	registe ability of of the li	red office and company, it is mited liability liability com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	4/	K	vin Code	
_	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to mei	by accept the appointment as registered agent and ag tions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I d in writing of this change.	ree to a perfori d for in hereby	ct in this capa nance of my d Chapter 605, confirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
Signat	ure of Registered Agent			