L110000 98850

(Red	questor's Name)					
(Add	dress)					
(Add	dress)					
(City	y/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificate	s of Status				
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COVER LETTER

TO: Registration Section Division of Corporations						
B&Z Diving Services, LLC SUBJECT:						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	s matter to the following:					
Karli Hape						
Name of Person						
B&Z Diving Service, LLC						
Firm/Company						
4609 E Boonville New Harmony Rd						
Address						
Evansville, IN 47725						
City/State and Zip Code						
ap@bzdiving.com						
E-mail address: (to be used for future annual	ual report notification)					
For further information concerning this matter,	please call:					
Karli Hape	812 867-4878					
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 Tallahassec, Florida 32314					
Enclosed is a check for the following	amount:					
☑ \$25 Filing Fee 8095-700	☐ \$55 Filing Fee & Certified Copy					
INHS18 (2/14)						

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: B&Z Diving Se	ervice,	LLC		
2. (a)			b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (· · · · · · · · · · · · · · · · · · ·	Mailing address of limit	
	11226 Coral Key Dr.		4609	E Boonville New H	
	Boca Raton, FL 33498	_		sville, IN 47725	
	8/29/2011		L11000	0098850	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Benjamin J. Chewning				
(47)	Registered Agent and Registered Office shown on the records of th	e Florid	a Dept. of S	 State:	
	Benjamin J. Chewning		•		2019 JUL 22 SEUKLIAHA
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRES.	<u></u>		ALE SI
	1356 SW Alligator St				
	Palm City ,FL ³	4990	4102	<u> </u>	
(b)	Zachary N Gauldin			_	AMII: 43
(0)	Enter name of NEW Registered Agent and/or NEW Registered O	ffice ad	dress:		門里去
	Zachary N Gauldin				121
	NEW Registered Office Address:				
	11226 Coral Key Dr.				
	Boca Raton FL3	3498			
agent w	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liabilities.	of the	State of stered off ompany, i	ice and the business of it is hereby confirmed t	ffice of the registered
Signa	- Aulito			KARLI HAPE	E
I herel provisi the obli to mere notified	nute of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete polications of my position as registered agent as provided play reflect a change in the registered office address. I he is in writing of this change.	e to act erform for in C reby co	in this co ance of m Chapter 6 onfirm the	Printed or typed name of	of signee