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(Re	equestor's Name)	
(Address)		
(Ad	idress)	10 110
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificate:	s of Status
Special Instructions to Filing Officer:		





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B. ROSTICK
DEC - 2 2013
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: YACHTS// Name of Limite	ed 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 r	natter to the following:
George T. SmiTH Name of Person	
YACHTSmiTHLLC Firm/Company	
2101 MARINA ISLE WA	AY APT 406
Jupiter FLORIDA 3:	3477 3477
E-mail address: (to be used for future annual report notifica	ease call:
For further information concerning this matter, pl	ease call:
George T. SmiTH at (908 675-6746 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 an	nount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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:	TSMITH LLC
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME
OCToben 5 TH 2012 3. Date of filing/registration in Florida 4	<u> </u>
5. (a) Registered Agent and Registered Office shown on th	e records of the Florida Dept. of State:
Registered Agent:	George T. SmiTH
Registered Office Address:	DANIA BEACH FL
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	Registered Office address:
NEW Registered Agent:	77. 7
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	JUDITEL FL 33477
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited
Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer- address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	

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