L12000129176

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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'JUL 1 6 2013 T. HAMPTON

COVER LETTER

SUBJECT: MARINDERKS + DRIVES, LL Name of Limited Liability Company	<u>e</u>
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Chris Lophen De FRANCO Name of Person	
HARlin Decks & DRives, L.L.C. Firm/Company	
8675 S.W. 57 MANOR	
Cooper City/State and Zip Code City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Chr. stop her De FRANG at (954) 854-0001 Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:



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13 JUL 15 AM 6:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 5, 2013

CHRISTOPHER DE FRANCO 8675 SW 57 MANOR COOPER CITY, FL 33328

SUBJECT: MARLIN DECKS & DRIVES, LLC

Ref. Number: L12000129176

We have received your document for MARLIN DECKS & DRIVES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 013A00016581

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. liability company submits the following statement in orangent, or both, in the State of Florida.	ler to change its registered office or registered		
1. Name of the limited liability company: MAR lin	Decks + Drives LLC		
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	Cooper City 1-7, 33328		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	8675 SW S7 HAHOR Cooper City FT 33328		
October 2012 I	RS- 46-1270603		
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:	The Company ConpoRATION		
Registered Office Address:	27/1 Center Ville BD Williming ton De-19808		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: Christopher NEW Registered Agent: NEW Registered Agent:			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8675 S.W 57 HANGE		
	Cooper City, FL 33328		
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.			
Ol. Int 10 for	1		
Signature of a member or authorized representative of a member	1.500 1.5		
Charl S T			
Printed or typed name of signee			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my panter 608, F.S. Or, if this document is being filed to maddress. I hereby confirm that the limited liability company	garee to act in this canacity. I further agree to		

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

ignature of Régistered Agent