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## COVER LETTER

Division of Corporations			
SUBJECT: OFFERMAN OFFSHORE, UC  Name of Limited Liability Company			
Dear Sir or Madam:			
Dear Sir of Madain.			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
KEVIN OFFERMAN  Name of Person			
OFFERMAN OFFSHORE, LLC Firm/Company			
1712 SE HHTH TER Address			
CAPE CORAL FL 33904 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
KEUIN OFFERMAN at (239) 340-6055  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:			
\$25 Filing Fee \$\sim \\$55 Filing Fee & Certified Copy			

318 (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. Name of the limited liability company: OFFERMAN OFFEHORE, LLC
2. (a) 1712 SE 44 TH TER (b) 1712 SE 44TH TER
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
CAPE CORAL, FL 33904 CAPE CORAL, FL 33901
8/16/13 L13000116069
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:
1911 SE 20TH ST.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
CADE CORAL 1
FI -33904 33990 \$ 5 7
22
(b) KEUIN OFFERMAN 3 7 TT
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1712 SE 44th TER.
NEW Registered Office Address.
CADE CORAL, FL 33904
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 he articles of organization or the operating agreement of the limited liability company.
KEUIN OFFERMAN
Signature of agreement or authorized representative of a member Printed or typed name of signee
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept e obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed merely reflect a prange of the registered office address, I hereby confirm that the limited liability company has been uified in writing of this change.
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