(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP	WAIT	MAIL							
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
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MAR 3 1 2015 T. CARTER

COVER LETTER

TO: Registration Section Division of Corporations						
Oceanman Fiberglass LLC SUBJECT:	Oceanman Fiberglass LLC					
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	is matter to the following:					
Joseph Duley						
Name of Person						
Oceanman Fiberglass						
Firm/Company						
1025 Grinnell St.						
Address						
Key West, FL 33040						
City/State and Zip Code						
joseph.w.duley@gmail.com						
E-mail address: (to be used for future ann	nual report notification)					
For further information concerning this matter,	please call:					
Joseph Duley	305 766-0715					
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	☐ \$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.	Na	me of the limited liability company: Oceanman Fib	ergla	ss LLC				
2.	(a)	Joseph Duley	(b) Joseph Duley					
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(. —	Mailing address of limited (Note: MAY BE POST	-		
		1025 Grinnell St.		1025 Gri	nnell St.			
		Key West, FL 33040	-	Key West, FL 33040				
		9/11/13		L1300012	8694			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	Legal Zoom LLE United States Co	(D)Y	ation A	gents. Inc.			
	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State.						
		-Legal Zoom LLC						
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					7.0	
	13302 Winding Oaks Court Suite A					<u>ت</u>	É C	
		Tampa , FL	33612			MAR 26	RE TAF	
	(b)	Joseph Duley						
	Enter name of NEW Registered Agent and/or NEW Registere		Office address:			မ္း ေ		
		Oceanman Fiberglass				30	ATE RIDA	
		NEW Registered Office Address:						
		1025 Grinnell St.						
		Key West , FL	33040					
the ag	ent v ent v	imited liability company is not organized under the law inge or changes are made, the Florida street address of a vill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the reg bility c the lir imited	istered office ompany, it is nited liability	and the business office hereby confirmed the company or as other pany.	ce of that the c	ne registered hange(s)	
_	Signa	ture of a member or authorized representative of a member	- 30 .	sepii Daley	Printed or typed name of	signee		
pro the to	here oviși obl mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ly reflect a change in the registered office address, I had in writing of this change.	ee to ac perform for in ereby c	et in this capa nance of my a Chapter 605, confirm that t	acity I further goree	to com	oly with the a and accept being filed has been	
Si	gnatu	re of Registered Agent						

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