L13000130785

(Requestor's Name)	
···	
(Address)	
•	
(Address)	
(City/State/Zip/Phone #)	
<u> </u> 	
PICK-UP WAIT MAII	-
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer	
Special Instructions to Filing Officer: J. HORNE JUN 2 4 202	-
. 301V 2 4 202	4
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Office Use Only



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2024 JU-21 1010200 RECEIVED

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (851) 656-4724

DATE 06/21/2024	_		⇔WALK IN⇔
ENTITY NAME SEAGE	ATE MARINA LLC		
DOCUMENT NUMBER_			
	PLEASE FILE THE AT	TACHED AND RETURN	•
XXXXXXXX	Plain Copy Certified Copy Certificate of Status		
*	PLEASE OBTAIN THE FOLLOW	VING FOR THE ABOVE EN	//////**
	Certified Copy of Arts & A Certificate of Good Standing	mendments	
	**APOSTILLE' / NOTA	RIAL CERTIFICATION'	+ ★
COUNTRY OF DESTINA NUMBER OF CERTIFICA	.		
TOTAL OWED \$25		ACCOUNT #: 126	
Please call Tina at i	the above number for any	issues or concerns. 7	hank you so much!

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	ame of the limited liability company: SEAGATE MA	RINA LLO	2	
2. (a)	3600 Hamlet Drive DELRAY BEACH, FL 33445	(1	3600 Ha	mlet Drive DELRAY BEACH, FL 33445
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(~/ <u></u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		_ _		
	09/16/2013		L1300013	
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Registered Agent and Registered Office shown on the records of NRAI SERVICES, INC.			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1200 SOUTH PINE ISLAND ROAD			121
	PLANTATION I	FL_33324		2024 JE (2)
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> Platinum Agent Services LLC	ed Office at	Idress:	- E 67
	NEW Registered Office Address:			
	155 Office Plaza Dr			_
	Tallahassee, I	FL_32301		_
change agent was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	he register liability co s of the lin	ed office a ompany, it nited liabil	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
/s/ The	omas Faraçe	The	omas Farace	
I here provis the ob to mer notifie	ture of a member or authorized representative of a member by accept the appointment as registered agent and a line of all statutes relative to the proper and completing ations of my position as registered agent as providely reflect a change in the registered office address, d in writing of this change.	gree to ac ie perform led for in (I hereby c	t in this ca ance of my Chapter 60 onfirm tha	Printed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and accept 35. F.S. Or, if this document is being filed the limited liability company has been
	rven Friedman ire of Registered Agent			