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COVER LETTER .

TO: Registration Section Division of Corporations					
SUBJECT: DK MARINE SER. Name of Lin	nited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chan	age and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	to the following:				
Name of Person					
DK MANUE SERVICES LLC Firm/Company					
13546 FOUNTAINVIEW BLU Address	٥				
WELLINGTON FL 33414 City/State and Zip Code	,				
E-mail address: (to be used for future annual repo	rt notification)				
For further information concerning this matter, please of	all:				
Name of Person	561) 309. 3641 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.

- 10.700	· ·				
1. Na	me of the limited liability company:	MARINE	SERVICES "	LLC	
2. (a)	Principal office address of limited liability company:			ess of limited liability con	
	(Note: MUST BE STREET ADDRESS)		_	<u>AY BE POST OFFICE B</u>	
	13546 FOUNTAINVIEW BLUD				
	WELLINGTON FL 33414		WELLIN	Grow FZ 33	414
	O1/15/2014 Date of filing/registration in Florida		L14000	008187	
3.	Date of filing/registration in Florida	4.	Documen	t number	
5. (a)	DONALA C KING				
` ′	Registered Agent and Registered Office shown on the records	s of the Florida D	ept. of State:		
	DK MANINZ SERVICES	- 660			
	Registered Office Address (MUST BE FLORIDA STREE			201 8	
	13546 FOUNTAIN VIEW			HAY 17	-;
	WELLINGTON	FL 33	414	MAY 17	1
(b) .	Enter name of NEW Registered Agent and/or NEW Register			PM 4: 09 TELFLORIO	
			<u>au</u> :	RID/	
	DE MARINE SERVICES	LLC			
	NEW Registered Office Address:	_			
	13546 FOUNTAIN VIZES /	BEND			
	WELLINGTON,	FL	414		
If the lin	mited liability company is not organized under the	laws of the St	ate of Florida, it is l	hereby confirmed tha	t after
the chai	nge or changes are made, the Florida street address	s of the registe	red office and the bi	usiness office of the i	registered
was/wei	ill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the member	rs of the limite	pany, it is nereby co ed liability company	onfirmed that the chai	nge(s) ided in
the artic	cles of organization or the operating agreement of t	the limited lial	oility company.	•	
	W. The state of th		Danaco	yped name of signee	
_	are of a member or authorized representative of a member		_		
provisio the oblig to mere	y accept the appointment as registered agent and a ons of all statutes relative to the proper and comple gations of my position as registered agent as provi ly reflect a change in the registered office address, in writing of this change.	agree to act in ele performan ided for in Cho , I hereby conj	this capacity. I fur ce of my duties, and apter 605, F.S. Or, irm that the limited	ther agree to comply 'I am familiar with a if this document is be 'Iiahility company ha	with the nd accept ging filed as been
0:	White				
Signature	e of Registered Agent				