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Division of Corporations							
SUBJECT: AQUA - JET LLC"							
Name of Limited Liability Company							
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:							
ROBERT MACIA Name of Person AQUA-JET LLC'' Firm/Company							
3325 GRIFFIN Rd SUIT #150 Address							
FT LAUdendale FL 33312 City/State and Zip Code							
AQUA - JETQ HOTMAIL, COME E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
RONALD YATES at (954) 210-2034 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 & 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

Florida			\ L		_	
1. Na	me of the limited liability company: $A \circ \mathcal{A} A -$	Je7	- 4	<u> //</u>		
2. (a)	3325 GRIFFIN Rd SUTHISO) (b)	PO	BOX	364	3
2. (2)	Principal office address of limited liability company:	(0)_	Ma	ailing addr	ess of limited lia	bility company:
	(Note: MUST BE STREET ADDRESS)		_		AY BE POST O	·
	FT LAUDERSALE FL 33312	_	HOLL	ywo	od FL	33083
					·	
	3-17-2014		41	400	0043	884
3.		4.			t number	
5 (a)	RONALD YATES					
J. (u)	Registered Agent and Registered Office shown on the records of the	Florida De	ept. of State:			
	4581 SW 35 AVE					
	4581 5W 35 AVE Registered Office Address MUST BE FLORIDA STREET ADD	DRESS)				
	FT LAUDENDALE					;
	121	3331	7			士 養盛
	, FL	///				.
(b)	ROBERT MACIA					TA HAY -9
(-)	Enter name of NEW Registered Agent and/or NEW Registered Of	fice addre				و و و
						E 5 E 5
	3325 GRIFFIN ROAD SUI	10.H	<u> =150</u>			2 3
	NEW Registered Office Address:					
		_~~				
	FT LAUDERBALE ,FL.	<u> 333</u>	12			
If the li	mited liability company is not organized under the laws	of the St	ate of Flor	ida, it is	hereby confir	med that after
	nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabi					
was/we	re authorized by an affirmative vote of the members of t	he limite	d liability	company	or as otherw	rise provided in
the arti	cles of organization or the operating agreement of the lin	nited lial			_	_
			KONA	10	YATES typed name of si	
	ure of a member of authorized representative of a member					
I hereb provision the obli	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided for the registered a change in the registered office address. The	to act in rforman or in Ch	this capa ce of my di apter 605,	city. I fu uties, and F.S. Or,	rther agree to d I am familia if this docun	o comply with the er with and accept eent is being filed

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

Signature of Registered Agent