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LLC REGISTERED AGENT CHANGE TWISTED SQUIRREL MARINE METALWORKS, LĪC

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October 5, 2018

FLORIDA DEPARTMENT OF STATE

TWISTED SQUIRREL MARINE METALWORKS, LLC

2904 NORTHEAST 3RD AVE. CAPE CORAL, FL 33909

SUBJECT: TWISTED SQUIRREL MARINE METALWORKS, LLC

RBF: L14000178348

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II FAX Aud. #: 818000285183 Letter Number: 818A00020784

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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	Name of the limited liability company: Twisted Squirrel Marine Metalworks, LLC					
2. (a)	2904 Northeast 3rd Ave.		2904 Northeast 3rd Ave			
ζ ω ,	Principal office address of limited lin (Note: MUST BE STREET A	ability company:	(/		(Note: MAY BE POST OFFICE BOX)	
	Cape Coral, FL 33909		_	Cape Co	ral, FL 33909	
	11/17/2014			.1400017	8348	
3.	Date of filing/registration is	r Florida	4.	,=.	Document number	
5. (a)	HL Statutory Agent, Inc.					
~·	Registered Agent and Registered Office shor	un on the records of th	e Florida	Dept. of State	:	
	Registered Office Address (MUST RE F	LORIDA STREET A	DDRESS)	······································		
	5811 Pelican Bay Blvd., Suite				- 7	
	Napies	, FL. <u>`</u>	34108		. 60	
107	Cohen & Grigsby PC				07 -8 AM	
	Enter name of NEW Registered Agent and	for NEW Registered (Mice add	ress:	27.00 mg/s	
	Michael G. Dana, Esq.				(2)	
	NEW Registered Office Address:				7 5	
	9110 Strada Place , Suite	6200				
	Naples	.FL	34108			
the cha agent v	imited liability company is not organinge or changes are made, the Florida will be identical. Or, in the case of a	ized under the law a street address of t Florida limited lial of the members of	s of the the regis bility co f the lim	State of Flo tered office npany, it is ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
(,			olyn Pierc	e Authorized Representative		
Signa	unre of a member or authorized representative	of a member			Printed or typed name of signee	
provisi the obj to ol er	by accept the appointment as register ions of all statutes relative to the pro- ligations of my position as registered ely reflect a change in the registered at in writing of this change.	red agent and agre per and complete p agent as provided office address, I h 	te to act performa I far in C ereby co	in this cape ince of my e hapter 605 nfirm that (wity, I further agree to comply with the luties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been	
Sygnaty	he of Realistered Agent	<u></u>				
~ {	Division of Corp	orations+ P.O. B	ox 6327	• Tallahas	see, FL 32314	
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