## L1500058838

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: PORT OF CALL CHARTERS  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:
Name of Person
PORT OF CAU CHARTERS Firm/Company
2531 ZHO ST. Address
FORT MYE2S, FL 33901 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Division of Corporations Clifton Building Division of Corporations P.O. Box 6327 Tallahassee, Florida 32301 Tallahassee, Florida 32301
Enclosed is a check for the following amount:

□ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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: PORT OF CALL CHARTERS
2. (a)	9/60   SUTTERFLY CIZT (b)   9/60   SUTTERFLY CIZT   Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)
	FORT WIERS, FL BOOK FORT MYEDS, FL BOOKS
	33919 33919
	04/02/15 <u>L150000 58828</u>
3.	Date of filing/registration in Florida 4. Document number
5. (a)	none listed- resigned
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	, FL S
(b)	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	2531 2NO ST
	NEW Registered Office Address: 2531 ZNO ST.
	FORT MYERS, FOR
	.FL 33901
TC41 1!	
the char agent w was/we	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after age or changes are made, the Florida street address of the registered office and the business office of the registered ill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) re authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the organization of the operating agreement of the limited liability company.
	THE CEO BECKTI, JOSEPH D.
Signati	re of a member Printed or typed name of signee
provisio	y accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept gations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been in writing of this difference.
Signatur	e of Registered Agent