## L1500088402

(Requestor's Name)						
(Address)						
(Address)						
y/State/Zip/Phone	e #)					
☐ WAIT	MAIL					
(Business Entity Name)						
(Document Number)						
_ Certificates	s of Status					
Special Instructions to Filing Officer:						
	:					
	dress)  dress)  y/State/Zip/Phone  WAIT  siness Entity Nar  cument Number)  Certificates					

Office Use Only



000285889520

05/25/16--01010--001 \*\*25.00

smlin

## COVER LETTER:

TO:	Registration Section Division of Corporations			
SUBJ	JECT: Laurel Yacht Sales LLC	me of Limite	ed Liability Company	
		ne or Linne	ы славиту сопрату	
Dear	Sir or Madam:			
The e	nclosed Registered Agent/Registered Of	fice Change	and fee(s) are submitted for file	ing.
Please	e return all correspondence concerning th	nis matter to	the following:	
Davi	d R. Longfellow			
	Name of Person		<del></del>	
Laur	el Yacht Sales			70 <b>5</b>
	Firm/Company		<del></del>	
961	Laurel Road			E 25 P
	Address			
Nortl	h Palm Beach, FL 33408			(2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
	City/State and Zip Code		<u> </u>	**************************************
longi	fellowsbeach@gmail.com			
	E-mail address: (to be used for future and	nual report n	otification)	
For fu	arther information concerning this matter	, please call:	:	
Kimb	erly Longfellow	561	281-6741	
	Name of Person	aı (	Area Code & Daytime Te	elephone Number
- 1	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:		
	<b>2</b> \$25 Filing Fee		\$55 Filing Fee & Certified Co	эру

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: Laurel Yach	Sales		
2. (	a)	Laurel Yacht Sales	(1	b)	
<i>2.</i> (	u,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	('		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		961 Laurel Road			
		North Palm Beach, FL 33408	<del></del>		
		05/19/2016		L1500008	8402
3.		Date of filing/registration in Florida	4.		Document number
5. (	(a)	United States Corporation Agents, Inc.			
<i>J</i> . (	(a)	Registered Agent and Registered Office shown on the records o	f the Florida	a Dept. of State	:
		United States Corporation Agents Inc		r	
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	5)	
		13302 Winding Oak Court A		_	
		Tampa .F	33612		
				<u> </u>	岩 王
(	b)	Kimberly Longfellow			25 E
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office ad	dress:	ि इंग्रिक्ट वि
		Kimberly Longfellow			50% <b>织</b>
		NEW Registered Office Address:			25, ca
		961 Laurel Road			
		North Palm Beach	<sub>L</sub> 33408		
the cagen was/ the a	t w we rtic	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited I re authorized by an affirmative vote of the members cles of organization of the aperating agreement of the	f the registiability of the limited l	stered office ompany, it is nited liability liability com/	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  Jellow
		are of a member of authorized representative of a member			Printed or typed name of signee
prov the o to m	isio bli ere	y accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as providely reflect a change in the registered office address, I in writing of this change.	e performe ed for in C	ance of my d Chapter 605.	uties, and I am familiar with and accept F.S. Or. if this document is being filed
Signa	atur	e of Registered Agent			