## 117000003540

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2017

DAVID DUVERNAY FLORIDA FUNBOAT LLC 8954 111TH STREET SEMINOLE, FL 33772

SUBJECT: FLORIDA FUNBOAT LLC

Ref. Number: L17000003540

We have received your document for FLORIDA FUNBOAT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 817A00006635

SECHENSIE FERRIDA

## **COVER LETTER**

Division of Corporations		
SUBJECT: Florida FunBoat LLC		
Name of Li	mited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
David DuVernay		
Name of Person		
Florida FunBoat LLC		
Firm/Company	<del></del>	
8954 111th Street		
Address	TAPR	
Seminole, FL 33772	حَّمَّ ۱ ن	
City/State and Zip Code		
dduvernay727@gmail.com	r	
E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this matter, please	call:	
David DuVernay	727 906-7993	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	The state of the s	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amour	nt:	
<b>2</b> \$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.

1. Na	me of the limited liability company: Florida FunBo		
2. (a)	8954 111th Street		(b) 8954 111th Street
2. (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)
	Seminole, FL 33772	_	Seminole, FL 33772
	January 5, 2017		L17000003540
3. 5. (a)	Date of filing/registration in Florida DUVERNAY, DAVID M	4.	Document number
). (u)	Registered Agent and Registered Office shown on the records of	the Flori	orida Dept. of State:
	Registered Office Address  5512 48th Ave. N.	4DDRE	
	Kenneth City, FL	3370	09 SET
(b)	DUVERNAY, DAVID M Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	e address:
	NEW Registered Office Address:	<del>-</del>	
	8954 111th Street		<del></del>
	Seminole, FL	3377	72
the cha agent was/wa	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regability of the limited	registered office and the business office of the registered y company, it is hereby confirmed that the change(s) limited liability company or as otherwise provided in ed liability company.
	partilla	D	David M DuVernay
Signa I here provisi the obs to mer notifie	7	ree to a perfor id for it hereby	Printed or typed name of signee of act in this capacity. I further agree to comply with the ormance of my duties, and I am familiar with and accep in Chapter 605, F.S. Or, if this document is being filed by confirm that the limited liability company has been
Signaty	are of Registered Agent		