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COVER LETTER

TO: Registration Section Division of Corporations	
a vilicen of conportation.	
SUBJECT: Kilpatrick Performance Marine 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:	
Daniel Kilpatrick	
Name of Person	
Kilpatrick Performance Marine	
Firm/Company	
57 Jewfish ave	
Address	
Key Largo , FL 33037	
City/State and Zip Code	
<u>Kilpatrickperformancemarine@gmail.com</u> E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Daniel Kilpatrick 708 289 - 5997	
Daniel Kilpatrick at (708) 289 - 5997 Name of Person Area Code & Daytime Telephone Num	– ber
STREET/COURIER ADDRESS: MAILING ADDRESS:	
Registration Section Registration Section	
Division of Corporations Division of Corporations	
Clifton Building P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301	
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.

1. Na	me of the limited liability company: Kilpatrick Performance Marine LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Ney LARGO FL, 33037 Mialing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Mialing Address of limited liability company: (Note: MAY BE POST OFFICE BOX) Miami FL, 33196
3. 5. (a)	11/6/2017 Date of filing/registration in Florida Daniel M. Hilpatrick Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
(b)	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Key CARGO FL 33037 BETH ANNE MICHATRICK Enter name of NEW Registered Agent and/or NEW Registered Office address:
	NEW Registered Office Address:
	, FL
the cha agent w was/we the arti	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after nge or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company. Maria Alguarda Reyes Writted or typed name of signee
l herel proviși	by 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

provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent