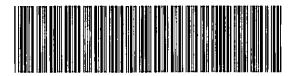
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COVER LETTER

TO: Registration Section Division of Corporations	•
A HABANA CRUISING, LLC SUBJECT:	
	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change	ge and fec(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
MARK ZVILIUS	
Name of Person	
A HABANA CRUISING, LLC	
Firm/Company	
908 COCONUT DR	
Address	2020 SEC
FORT LAUDERDALE FL 33315	
City/State and Zip Code	
mark.zvilius@gmail.com	調のきづ
E-mail address: (to be used for future annual repor	rt notification)
For further information concerning this matter, please ca	all:
MARK ZVILIUS 40 at (08 313-5292
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount	: :
✓ ■ \$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	ime of the limited liability company: A HABANA CRU	ISING	i, [[.c		
2	(a)	908 COCONUT DR		(b) 908 COCONUT DR			
	(<i>a</i>)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	y:
		FORT LAUDERDALE FL 33315	-		FORT LA	AUDERDALE FL 33315	
		11/14/2017		l.	17000234	4966	
3. 5	(a)	Date of filing/registration in Florida MARK ZVILIUS	4.			Document number	
J.	(11)	Registered Agent and Registered Office shown on the records of the 2493 ANDROS LN	he Flor	ida I	Dept, of Sta	ate:	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		FORT LAUDERDALE , FL	33312				g 197 48 31 38 4 1972 4 14 14
	(b)					5	
	(-)	Enter name of NEW Registered Agent and/or NEW Registered (Office	add	ress:		į. į.
		908 COCONUT DR					ر ا
		NEW Registered Office Address:		J			
		FORT LAUDERDALE , FL	33315				
th pr	ange ent v is/we e arti Signa herei ovisi e obl merei	imited liability company is not organized under the law or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of teles of organization or the operating agreement of the liabete of a member authorized representative of a member by accept the appointment as registered agent and agreeins of all statutes relative to the proper and complete plications of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	registe bility I the li imited M	erec con imit d lia	office an appany, it ed liability con K ZVILIU	nd the business office of the registered is hereby confirmed that the change(ity company or as otherwise provided impany. US Printed or typed name of signee	:d s) d in
/		Division of Corporations P.O. B				assee, FL 32314	