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(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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COVER LETTER

Division of Corporations							
Ocean Reef Offshore Charters LLC SUBJECT:							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Change and fe	c(s) are submitted for filing.						
Please return all correspondence concerning this matter to the fol	Howing:						
Arthur Berry III							
Name of Person	-						
Ocean Reef Offshore Charters LLC							
Firm/Company	-						
35 A Moorings	·						
Address	-						
Key Largo, FL 33037							
City/State and Zip Code							
aberry 1964@gmail.com							
E-mail address: (to be used for future annual report notifica	ation)						
For further information concerning this matter, please call:							
Arthur Berry III 570	977-4500						
	Area Code & Daytime Telephone Number						
Mailing Address:	Street Address:						
Registration Section	Registration Section						
Division of Corporations	Division of Corporations						
P.O. Box 6327	The Centre of Tallahassee						
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enclosed is a check for the following amount:							
S25 Filing Fee \$555	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.

I. N	ame of the limited liability company: Ocean Reef Offs	hore Cha	rters LLC		
2. (a)			(b)		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		M	ailing address of limite	
	35 A Moorings		35 A Moorii	ngs	
	Key Largo, FL 33037	_	Key Largo,	FL 33037	
	October 4, 2019		L19	00025	0555
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)					
	Registered Agent and Registered Office shown on the records of Staci A Barkalow	The Flori	da Dept. of State:		<i>r</i> ~3
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 35 A Moorings				ริยากการร
	Key Largo	L 33037			23
(b)	Enter name of NEW Registered Agent and/or NEW Registered Arthur Berry III	d Office a	ddress:		₹ 5.
	NEW Registered Office Address:				
	35A Moorings				
	Key Largo	33037-	3773		
hange igent v	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of the organization or the operating agreement of the	registe ability of of the linited	red office and ompany, it is l mited liability	the business office hereby confirmed to company or as other	of the registered hat the change(s)
Signa	ture of a member or authorized representative of a member			Printed or typed name (of signee
rovisi he obl o mere	by accept the appointment as registered agent and agi ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I igh writing of this change.	<i>perforn</i> d for in	iance of my di Chapter 605	ities, and I am fam. F.S. Or. if this doc	iliar with and accept rument is being filed
	thin Bens				
Signatu	re of Registered Agent				