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*PR 1 6 2021 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TALL AHACSEE BOAT Name of Limited Lia	CHUVAS RODAM, LLC
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fe	ee(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	ollowing:
JEROME W KOWAIKE Name of Person	_
TAll 4 hASCEE BOAT CHOUSE Repair, Firm/Company	LLC
4/208 BON Blvd Address	
TA//A 114000 FL 32303 City/State and Zip Code	_
Pete K 1014 @ 44hoo. Com E-mail address: (to be used for future annual report notific	ation)
For further information concerning this matter, please call:	
JElome Kouflet at 5/2 Name of Person) 627 2909 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 CODANDER @ 5050 DURGED DOUGH DE STORE OF STREET OF STORE OF STORE

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 2. (a)	ame of the limited liability company: TALIA HASSEE BO 420x BON BIJO TALIANASSEE FL 32303 (b) Ly Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of	BIJOTALLA BIJOTALLA limited liability compa	htseet any: 323
	Date of filing registration in Florida LEGAL CORD SOLATONS, LLC Registered Agent and Registered Office shown on the records of the Florida Dept. of 3440 W Hollyword BLJ STE 415 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) SUITE 415 Holly Word D. FL 3702 JEROME W Registered Agent and/or NEW Registered Office address: 420 BEN BLJ NEW Registered Office Address:			· · · · · · · · · · · · · · · · · · ·
chang agent was/w the art Sign: I here provis the obto men	limited liability company is not organized under the laws of the State of e or changes are made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited liability company were authorized by an affirmative vote of the members of the limited liability company at the case of organization or the operating agreement of the limited liability which is a state of a member of authorized representative of a member eaby accept the appointment as registered agent and agree to act in this sions of all statutes relative to the proper and complete performance of oligations of my position as registered agent as provided for in Chapter rely reflect a change in the registered office address, I hereby confirm and in writing of this change.	of Florida, it is herebee and the business of the is hereby confirmability company or a company. ME W Kornacity I further	office of the register med that the chang is otherwise provided the control of th	ered (e(s) led in

gnature of Registered Agent

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

FILING FEE: \$25.00