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JQ 09/23/20

COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT: Twin Skis Jet Ski Rental Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Pierre Name of Person

Twin Skis Jet Ski Rental Firm/Company

3700 N S6th Ave Apt 1021 Address

Hollywood, Florida 33021 City/State and Zip Code

CPierce 9502 Qgmail Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

<u>Christopher Pierre</u> at (954) 760-9505 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:

X \$25 Filing Fee

S55 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.	Name of the limited liability company: Twin Sk	his Jet	- Shi	Rental LL	<u> </u>		
) <u>3700 N 56th Ave Apt 1021</u> Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		<u>2700</u> Mail	N 56H I ling address of limited li Note: MAY BE POST O	Ave ability con	ipany:	1201
	Hollywood, FL 33021		Hollyn	ood, FL 3	302	۱	
3.	07/23/2020 Date of filing/registration in Florida	4.	Do	2192852 ocument number			
5. (() United States Corporation Registered Agent and Registered Office shown on the records of	Agents	, Inc.				
	5575 S. Semoran BLVD Registered Office Address (MUST BE FLORIDA STREET	<u>36</u>					
	OrlandoFI				SECRET	107 020Z	-77
(}) <u>Christopher Pierre</u> Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addres	<u>s</u> :		AHAS	3	1
	3700 N 56th Ave Apt <u>NEW</u> Registered Office Address:	1021	<u>. </u>		OF STATE SEE, FL	AM 11: 01	Ē
	Hollywood FI	1 <u> </u>	?(
chan agen was/	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members sticles of organization or the operating agreement of the	e registered o ability compa of the limited	ffice and th any, it is he Hiability co	e business office of reby confirmed that ompany or as otherw	the regis	stered (s)	he
Sig	rature of a ntember or authorized representative of a member	_	• •	her fre (ve inted or typed name of si	gnee	,	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the 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

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00