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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. N	lame of the limited liability company: NAUTI-CHRIST	TNE LLC	
2. (a)		(b)	
.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	370 HTH AVENUE SOUTH, UNIT 2	370 11TH AVENUE SOUTH, UNIT 2	
٠	NAPLES, FL 34102	NAPLES, FL 34102	
	11/10/2020	L20000356210	
3.	Date of filing/registration in Florida	4. Document number	
5. (a	CHRISTINE HOMAN		
	Registered Agent and Registered Office shown on the records of	The Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	370 11TH AVENUE SOUTH, UNIT 2	25	
	NAPLES F	, 34102	
(b)	C T Corporation System	5. 30	
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
		·	
	NEW Registered Office Address:		
	1200 South Pine Island Road		
	Plantation F	L_33324	
the chagent was/withe ar Sign I herr provisithe of to men notific	range or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited by the authorized by an affirmative vote of the members ticles of organization or the operating agreement of the clearly of a member or authorized representative of a member Author 12ed Representative The accept the appointment as registered agent and as signs of all statutes relative to the proper and completed in the proper and comp	aws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in e limited liability company. Charles M. Meyer Printed or yped name of signee gree to act in this capacity. I further agree to comply with the ge performance of my duties, and I am familiar with and accept led for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been	

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

Signature of Registered Agent