(shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Fax: 8134365206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	

## LLC REGISTERED AGENT CHANGE VINTAGE BOAT CLUB, LLC

Certificate of Status	0
Certified Copy	0
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M. SOLOMON

## 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

ame of the limited liability company:	<u>Vintage</u>	Boat	Club	LLC	
Principal office address of limited II	ability company:			Mailing addre	ess of limited liability company  IY BE POST OFFICE BOX)
02/11/21			L21		
GRANT, JOSEPH, P.A.  Registered Agent and Registered Office shot  2744 HILLSBORO ROAD	wn on the records o		, 		number
WEST PALM BEACH	F	L 3340	)5		87 8EP 17 SECRELIANS TALL AHA
Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered Office address:					
7901 4th St N  NEW Registered Office Address: STE 300				_	C STATE
St. Petersburg	<b>:</b>	3370	2		
	Principal office address of limited II (Note: MUST BE STREET)  Date of filing/registration i GRANT, JOSEPH, P.A. Registered Agent and Registered Office sho 2744 HILLSBORO ROAD Registered Office Address (MUST BE II WEST PALM BEACH  Registered Agent and Topological Parts of NEW Registered Office Address: STE 300	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  02/11/21  Date of filling/registration in Florida GRANT, JOSEPH, P.A.  Registered Agent and Registered Office shown on the records o 2744 HILLSBORO ROAD  Registered Office Address (MUST BE FLORIDA STREET)  WEST PALM BEACH  FRegistered Agent and/or NEW Registere  7901 4th St N  NEW Registered Office Address: STE 300	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  02/11/21  Date of filing/registration in Florida 4.  GRANT, JOSEPH, P.A.  Registered Agent and Registered Office shown on the records of the Florida 2744 HILLSBORO ROAD  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  WEST PALM BEACH FLORIDA STREET ADDRESS  WEST PALM BEACH FLORIDA STREET ADDRESS  WEST PALM BEACH FLORIDA STREET ADDRESS  TO 1 4th St N  NEW Registered Office Address:  STE 300	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  Date of filing/registration in Florida GRANT, JOSEPH, P.A. Registered Agent and Registered Office shown on the records of the Florida Dept. of 2744 HILLSBORO ROAD Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  WEST PALM BEACH FL 33405  Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Office address: 7901 4th St N NEW Registered Office Address: STE 300	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  D2/11/21  Date of filling/registration in Florida  GRANT, JOSEPH, P.A.  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  2744 HILLSBORO ROAD  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  WEST PALM BEACH  FL 33405  Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered Office address:  7901 4th St N  NEW Registered Office Address:  STE 300

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Robin Jones Signature of a member or authorized representative of a member

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 ngtified in writing of this change.

Printed or typed name of signee

David Roberts - Assistant Secretary

Signature of Registered Agent