12/10/24, 11:00 AM

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

**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 CJ NAUTICAL HOLDINGS LLC

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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. Na	ame of the limited liability company:CJ NAUTICAL F	HOLDINGS	LLC	
2. (n)	224 EAGLE DRIVE	(b) 15983 N 80TH STREET		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(- / -	Mathing address of limited hability company: (Note: MAY BE POST OFFICE BOX)	
	UNIT 5083			
	JUPITER, FL 33477		COTTSDALE, AZ 85260	
	09/13/2021	L	L21000403982	
3.	Date of filing/registration in Florida	4,	Document number	
5. (a)	HIGH LAW LLC			
.i. (a)	Registered Agent and Registered Office shown on the records of	the Florida D	pt. of State:	
	800 SE Indian Street			
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)		
	Stuart, FL	34997		
	C T Corporation System		 -	
(h)	Enter name of NEW Registered Agent and/or NEW Registered	Office addre		
	The state of the s			
	NEW Registered Office Address:			
	1200 South Pine Island Road			
	Plantation , FL	33324		
the cha agent v was/wo	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members called of organization or the operating agreement of the	the registe ability com of the limite limited lial	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in	
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee	
provisi the obl to mere notified By:	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I is CT Corporation System To of Registered Agent Leslie I	performan d for in Ch hereby conj	er of my dulies, and Lam lamiliar Will and accept	