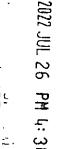
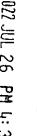


(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Section Division of Corporations			
3M Yachting LLC SUBJECT:			
	e of Limited L	iability Company	<u>.</u>
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	ce Change and	I fee(s) are submitted for filing.	
Please return all correspondence concerning this			
, g		· ·	
M. Timothy Hanlon, Esq.			
Name of Person		_	
Alley, Maass, Rogers & Lindsay, P.A.			
Firm/Company			2
340 Royal Poinciana Way, Suite 321			022
Address			. JUL 1
Palm Beach, Florida 33480			2022 JUL 26 PM 4:34
City/State and Zip Code	 		6 PM 4: 31
clyne@amrl.com			ည်း ည
E-mail address: (to be used for future annu	ual report noti	fication)	*
For further information concerning this matter,	please call:		
M. Timothy Hanlon	\$61	659-1770	
Name of Person	at (Area Code & Daytime Telephone Nun	nber
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	- 5	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.

l. Na	me of the limited liability company: 3M Yachting, LL	.c				<u></u>
2. (a)	3839 Bee Caves Road, Suite 205	(b) 3839 Bee Caves Road, Suite 205				
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		.,	Mailing address of limite	ed liability co	
	Westlake Hills, TX 78746		Westlake	Hills, Tx 78746		
	09/20/2021		L21000415	321		
3,	Date of filing/registration in Florida	— 4.		Document number		
	Andrew H. Bate					
5. (a)	Registered Agent and Registered Office shown on the records of 9128 Strada, Suite 400 Registered Office Address (MUST BE FLORIDA STREET)			ate:		
	Naples, F	ե <u>34105</u>	·	_ _		2022 JUL 26
(h)	M. Timothy Hanlon					JUE
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office	uddress:	_	÷.2	26
	340 Royal Poinciana Way, Suite 321			_	11. 01. 11. 11.	PH 4: 34
	NEW Registered Office Address:					÷. <u>3</u>
	Palm Beach	L_33480		_		
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ws of t e regist iability of the l e limite	he State of F ered office a company, it imited liabili d liability co	nd the business office is hereby confirmed (ty company or as oth	of the reg	gistered ange(s)
Signa	ture of a member of authorized representative of a member		arry Meyer	Printed or typed name	of signee	
I here provisi the obl to mero notified	by accept the appointment as registered agent and agens 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 din writing of this change. The of Registered Agent	e perfor ed for it	mance of my n Chapter 60	pacity. I further agre duties, and I am fam 5. F.S. Or. if this do	e to compl iliar with cument is l	and accept beine filed
	Division of Corporations • P.O.	Box 6	327• Tallaha	assee, FL 32314		

FILING FEE: \$25.00