

## Florida Department of State

**Division of Corporations Electronic Filing Cover Sheet** 

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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 : (855)330-1010

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

## LLC REGISTERED AGENT CHANGE MARITECH MANAGED SOLUTIONS LLC

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$25.00 |

## 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                     | Tame of the limited liability company: MARITE  | ECH M  | ANAGED SOLUTIONS LLC  |
|--------------------------|--|--|---|
| 2. (a)                   | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   | (b)  | Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)   |
|                          | 05/09/22   |  | 22000216862   |
| 3.                       | Date of filing/registration in Florida   | 4.   | Document number   |
| 5. (a                    | ZADOK CEORA  | ·  | ***************************************   |
|                          | Registered Agent and Registered Office shown on the records  1931 CORDOVA ROAD  Registered Office Address (MUST BE FLORIDA STREE) #1118  |  | Dept. of State:   |
|                          | 1-4-1-1  | <sub>FL</sub> 33316                          |   |
| (b)                      | Registered Agents Inc.  Enter name of NEW Registered Agent and/or NEW Registered 7901 4th St N   | red Office addi                              | <u>res</u> :  |
|                          | NEW Registered Office Address:   |  | <del></del>   |
|                          | STE 300  |  |   |
|                          | St. Petersburg   | FL_33702                                     |   |
| the cl<br>agent<br>was/v | limited liability company is not organized under the nange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street of | of the regist<br>Hiability corrs of the limi | ered office and the business office of the registered<br>apany, it is hereby confirmed that the change(s)<br>ed liability company or as otherwise provided in |
|                          |  |  | y Park  |
| Sign                     | ature of a member or authorized representative of a member   |  | Printed or typed name of signee   |
| provi<br>the ol<br>to me | eby accept the appointment as registered agent and a<br>sions of all statutes relative to the proper and complobligations of my position as registered agent as provi<br>rely reflect a change in the registered office address,<br>ed in writing of this change.  | ete performa<br>ided for in Ci               | nce of my duties, and I am familiar with and acceptapter 605, F.S. Or, if this document is being filed  |

Signature of Registered Agent

Bill Havre

- Assistant Secretary