L23 0000780 16

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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2023 EXY -1 PH 3: 02

COVER LETTER

Divi	sion of Corporations					
SUBJECT.	Seas the Moment Charters LLC Name of Limited Liability Company					
SUBJECT:						
Dear Sir or N	Madam:					
The enclosed	d Registered Agent/Registere	d Office Change and	fee(s) are submitted for t	filing.		
Please return	all correspondence concerni	ng this matter to the	following:			
Tyler K Gues	s					
	Name of Person					
	Firm/Company		_	7823 11.13 		
241 Reiters V	iew Rd					
	Address		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
Marion, KY 4	12064					
	City/State and Zip C	ode				
tkguess1417@	gmail.com					
E-mail	address: (to be used for future	re annual report notif	ication)			
For further in	nformation concerning this m	natter, please call:				
Tyler K Gues	s	970 at (318-1600			
	Name of Person		Area Code & Daytime	Telephone Number		
Reg Divi P.O	istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corpora The Centre of Tallal 2415 N. Monroe Str Tallahassee, FL 323	tions nassee eet, Suite 810		
Enc	losed is a check for the follo	owing amount:	\mathcal{A}			
= \$:	25 Filing Fee	□ 9:	55 Filing Fee & Certified	Сору		

INHS18 (2/14)

TO: Registration Section

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.

(a)	1019 Triangle Street		(b) 6501 F	Red Hook Plaza, # 698
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Lakeland, FL 33805		St. The	omas, USVI 00802
	02/13/2023		 L230007	78016
	Date of filing/registration in Florida	— 4.		Document number
	Angela D Stone			
(a)	Registered Agent and Registered Office shown on the records of	of the Flor	ida Dept. of	State:
	1019 Triangle St			
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRE	SS)	
	Lakeland	33805		
	, r	'L		. 1
(b)	Tyler K Guess			-
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office	address:	eş (
	2501 Weddington Green Ct			0.2
	NEW Registered Office Address:	·····		
	Kissimmee	34744		
	, F	L		
ange ent v is/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited last authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe liability of the l	ered office company, mited liab	and the business office of the registered it is hereby confirmed that the change(s) pility company or as otherwise provided in
	ala S. Stone	A	ngela D Sto	one
	ture of a member or authorized representative of a member			Printed or typed name of signee

Signature of Registered Agent

notified in writing of this