00000002635

ACCOUNT NO. 072100000032

REFERENCE

159708

AUTHORIZATION

COST LIMIT :

\$ 25.00

ORDER DATE: January 30, 2002

ORDER TIME :

4:38 PM

ORDER NO. : 159708-205

CUSTOMER NO:

7309272

600005175986--2

CUSTOMER: Mr. Scott Tilley

Marinemax

18167 U.s. 19 North

Suite 499

Clearwater, FL 33764

CHANGE OF AGENT

NAME:

MARINEMAX OF SOUTHEAST

FLORIDA, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

_ PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

02 HAR 29 AM 8:25

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited	d liability company is	s: MARINEMAX	OF SOUTHEAS	r FLORIDA, LL	iC	
2. The mailing address of	the limited liability	company is: <u>1</u>	8167 U.S. 1	North, Suit	e 499	
Clearwater, FL 337	64					
					,	_•
12/20/2000			M0000000263	5 .		
3. Date of filing/registration in Florida 4. Document num						
5. The name of the registe Florida Department of S		istered office ac	ddress as show	n on the records	of the	
	C T Co	rporation Sys	stem .			
		Name				
	1200 Sout	h Pine Islan	d Road			
		Address				
Plantation, FL 33324 City, State and Zip					Ci	
6. The name and address of		•		·	DIVISION OF C	2.7
	Q=+				\(\frac{1}{2}\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2	ή :
	Corporaci	on Service Co	Jubany			بنتيق
Name 1201 Hays Street					R R	10
	Florida street addre		OT acceptable	- -	œ <u></u>	, } !
	i iorida succi addit	235 (1 .O. DOX 14	O I acceptable	•)	くば	
	Tallahassee	FL	32301		5 SE	
	City,	State and Zip		_	-	
If the limited liability com confirmed that after the ch and the business office of liability company, it is her the members of the limited the operating agreement of Signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member or authorical street of the signature of a member of a memb	nange or changes are the registered agent below confirmed that the diability company of the limited liability	made, the Florical be identical he change(s) was otherwise per company.	da street addre . Or. in the ca	ss of the register se of a Florida l	red office imited	of
Kurt M. Frahn, Author (Printed or typed name of signee)		ive of MMX Ho	oldings, LLC		÷	
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)	_♪▽ Laui	agent and agre ive to the prope ons of my positi g filed to merely lity company ha ra R. Dunlap t. Secretary	e to act in this r and complete on as registere reflect a chan is been notified	capacity. I furt e performance of d agent as prov ge in the registe I in writing of th	her agree to f my duties, ided for in ered office iis change.	9
Divisio	n of Corporations, l	_	Tallahassee,	FL 32314		

FILING FEE: \$25.00

INHS18(10/99)