

ACCOUNT NO. :

072100000032

REFERENCE :

159708

AUTHORIZATION :

COST LIMIT :

ORDER DATE: January 30, 2002

ORDER TIME : 4:37 PM

ORDER NO. : 159708-195

CUSTOMER NO: 7309272

CUSTOMER: Mr. Scott Tilley

Marinemax

18167 U.s. 19 North

Suite 499

Clearwater, FL 33764

CHANGE OF AGENT

MARINEMAX OF SARASOTA, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

____ PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

DIVISION OF CORPORATION

400005175984--9

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 limite	d liability company is	: MARINEMAX	OF SARASO	TA, LLC		
2. The mailing address of	f the limited liability c	ompany is : _2	8167 U.S.	19 North,	Suite 4	199
Clearwater, FL 33	764		·	· ·		
11/30/2001			M01000002	584	_	<u> </u>
3. Date of filing/registration in Florida		4	4. Documen	t number		
5. The name of the register Florida Department of		stered office a	ddress as sho	own on the r	ecords of	the
	C T Cor	poration Sys	stem			
		Name				
	1200 Sout	h Pine Islan	d Road			
Address						? \\
Plantation, FL 33324					7	
City, State and Zip					37	SION
6. The name and address of the new registered agent and/or office:					7	OF CO
	Corporation	on Service C	ompany		. 3	
Name						A. ORK
	1201 Hays Street				(ω $\exists \overline{z}$
Florida street address (P.O. Box NOT acceptable)				ble)	(33 × 55
	Tallahassee	FL	32301			
	City,	State and Zip	÷			
If the limited liability conconfirmed that after the cand the business office of liability company, it is he the members of the limite the operating agreement of the limite of a member or author (Signature of a member or author)	hange or changes are a the registered agent vereby confirmed that the ded liability company of the limited liability	made, the Flori vill be identica e change(s) was otherwise peompany.	s of the State da street add l. Or, in the as/were authorovided in t	e of Florida, lress of the r case of a Fl orized by an the articles o	, it is herel registered orida limi affirmati of organiza	by office ted ve vote of ation or
Kurt M. Frahn, Autho (Printed or typed name of signee	rized Representati	ive of mm	x Holdings	, LLC-Me	mber	
I hereby accept the appo comply with the provision and I am familiar with ar Chapter 608, F.S. Or, if address, I hereby confirm	intment as registered ns of all statutes relati nd accept the obligatio this document is being n that the limited liabil	agent and agre ve to the prope ns of my positi filed to merel ity company he	ee to act in the r and compl on as registe y reflect a ch as been notij	iis capacity. ete perform ered agent a jange in the ied in writir	I further ance of m is provided registered ig of this o	agree to y duties, d for in d office change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Laura R. Dunlap Asst. Secretary

FILING FEE: \$25.00

INHS18(10/99)

ama R.D

(Signature of Registered Agent)