Ma1000015041

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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com Ext: Date: 06/17/24 Order #: 1531471-1 Re: Blue Ocean Physical Products LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find: Change of Registered Agent and Office Check in the amount of: \$25.00 - FL State Account Number: I20000000195 AUTH Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Amanda Miller c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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.

. N	ame of the limited liability company:		·····	
. (a)	825 US Highway 1		(b)	
. (-,	Principal office address of limited liability company: (<u>Nute: MUST BE STREET ADDRESS</u>)		Mailing address of fimited liability com (Note: MAY BE POST OFFICE BC	• •
	Suite 100		Suite 100	
	Jupiter FL 33477		Jupiter FL 33477	
	11/10/2021		M21000015047	
	Date of filing/registration in Florida	4.	Document number	
(a)	Corporation Service Company			
. (u,	Registered Agent and Registered Office shown on the records	of the Flor	orida Dept. of State:	
. (4)	Registered Agent and Registered Office shown on the records 1201 Hays Street Registered Office Address <u>(MUST BE FLORIDA STREE</u>			
(4)	1201 Hays Street Registered Office Address <u>(MUST BE FLORIDA STREE</u>	TADDRE	<u>ESS)</u> 1-2525	
	1201 Hays Street Registered Office Address <u>(MUST BE FLORIDA STREE</u>	<u>32301</u>	<u>ESS)</u> 1-2525	
(b)	1201 Hays Street Registered Office Address <u>(MUST BE FLORIDA STREE</u> Tallahassee	<u>ТАРДКЕ</u> FL	<u>ESS)</u> 1-2525	
	1201 Hays Street Registered Office Address <u>(MUST BE FLORIDA STREE</u> Tallahassee Steven Domney	<u>ТАРДКЕ</u> FL	1-2525	
	1201 Hays Street Registered Office Address <u>(MUST BE FLORIDA STREE</u> Tallahassee Steven Domney Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	<u>ТАРДКЕ</u> FL	ESS) 1-2525	
	1201 Hays Street Registered Office Address <u>(MUST BE FLORIDA STREE</u> Tallahassee Steven Domney Ente: name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 825 US Highway 1	<u>ТАРДКЕ</u> FL	1-2525	

the finited hability company is not organized under the laws of the state of Plorida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

STOW DOMMCG Signature of a member or authorized representative of a member

Steven Domney

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writine of this change.

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Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00