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JQ 10/02/20

COVER LETTER

Amendment Section Division of Corporations

	ANTO GUANO ANG
SUBJECT: KEY WEST COMMITTEE FOR SAFER CLEAR Name of Corporation	ANER SHIPS, INC.
DOCUMENT NUMBER: N20000004820A	
The enclosed Statement of Change of Registered Office,	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Evan Haskeil	
Name of Contact Person	
ICey West Committee for Safe Cleve Firm/Company 3812 Flagler Ave	rships, Inc
Address Key West, FL 33040	
City/State and Zip Code evhaskell@gmail.com	
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please c	all:
Evan Haskell	at (305 393-5797 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depart	nent of State.
Amendment Section	Street Address: Amendment Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0503, 607.1508, or 617.1508, Florida Sta nge is submitted for a corporation organized under the laws of the State of Flor r to change its registered office or registered agent, or both, in the State of Flor	orida		
	he corporation: 720b Caroline St, Key West, FL 33040 office address:			
2. The printerpar	ornee address.			
3. The mailing a	ddress (if different):			-
4. Date of incorp	oration/qualification: Document number:	-820		-
	street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned)	the		
	Haskell, Evan			
	3812 Flagler Ave		2020	
	Key West, FL 33040	RET	1020 AUG 17	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered offic	ARY OF MASSE	17 PH	
	Peter Homer	m _C ,	ယ္	(
	1200 Four Seasons Tower, 14:1 Brickell Avenue		₽	
	PO Box NOT acceptable Miami, FL 33131			
The street addre as changed will	ss of its registered office and the street address of the business office of its be identical.	registered	agent,	
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an ole board, or the corporation has been notified in writing of the change.	fficer so		
Evan Haskell, Pre				
_	e of an officer of director Printed or typed name and title			
I hereby accept of further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp of I am familiar with and accept the obligation of my position as registered of the interest to reflect a change in the registered office address. I hereby been notified in writing of this change.	lete perfo agent. Or confirm t	rmance · if this hat the	•
Í	mh. Hom 8/14/202	0		
Sign	nature of Registered Agent Bate			
If signing on bel	Herry Hoppier			

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)