## P010000/3323

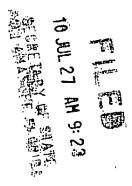
á			
(Red	questor's Name)		
(Add	iress)		
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(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



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RA Change 7-28-10 De

## **COVER LETTER**

TO: Amendment Section Division of Corpora	n ntions			
SUBJECT:	Finch Marine Const			
	Name of Cor	poration		
DOCUMENT NUMBER:	P010	0013323		
The enclosed Statement of	Change of Registered Office//	Agent and fee are submitted for filing.		
Please return all correspond	ence concerning this matter to	o the following:		
Paul E. Finch				
	Name of Conta	ict retson		
Finch Marne Consultants, Inc.				
Firm/Company				
	4700 N. Flag	ler Drive		
	Addres	'S		
	West Dalm Bossi	h Et 33407		
West Palm Beach, FL 33407  City/State and Zip Code				
	•	•		
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Daul D	E. Finch	11 11 11 (43)		
Name of Co		at (S41 311 6437 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.				
<u>M</u> a	iling Address:	Street Address:		
	nendment Section	Amendment Section		
	vision of Corporations  D. Box 6327	Division of Corporations Clifton Building		
	lahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flor statement of change is submitted for a corporation organized under the laws of the State	of FLA
in order to change its registered office or registered agent, or both, in the State	oj rioriaa.
1. The name of the corporation: Finch Marine Consultants, Inc.	22407
2. The principal office address: 4700 N. Flagler Drive, West Palm Beach, FL	33407
3. The mailing address (if different):	
4. Date of incorporation/qualification: 2-22-200[ Document number:	P0100013323
5. The name and street address of the current registered agent and registered office on fill Florida Department of State: (If resigned, enter resigned)	
Paul E. Finch	
139 Sunrise Avenue, #209	54 6
Palm Beach, FL 33480	
6. The name and street address of the new registered agent (if changed) and /or registere (if changed):	N 1
4700 N. Flagler Drive	<b>9</b>
West Palm Beach, FL 33407	22 1
P.O. Box NOT acceptable	, south
The street address of its registered office and the street address of the business office as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or is authorized by the board, or the corporation has been notified in writing of the change	e.
Four Frank Paul E. Finch, Signature of an officer or director Printed or typed name	President
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 of my duties, and I am familiar with and accept the obligation of my position as registered office address, I corporation has been notified in writing of this change.	
Signature of Registered Agent 123-1	
If signing on behalf of an entity:	
PAUL EFINCH	

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