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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dusiness Entity Name)			
(Document Number)			
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SECRETARY OF STATE
TALLAHASSEE. FLORID

COVER LETTER

	ndment Section ion of Corporations			
SUBJECT: Floridian Coastline Sportfishing Inc. / Name of Corporation				
DOCUMENT	T NUMBER: PO	6000147284 /		
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:				
Juan Carlos Cruz				
Name of Contact Person				
Floridian Coastline Group				
Firm/Company				
2450 E Commercial Boulevard Suite 203				
Address				
Fort Lauderdale, Florida 33308				
City/State and Zip Code				
jccruz@floridiancoastline.com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
	Juan Carlos Cruz	at (561) 302-5771		
	Name of Contact Person	at (561) 302-5771 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.				
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 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				
statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.				
1. The name of the corporation: Floridian Coastline Sportfishing Inc.				
2. The principal office address: 2450 E Commercial Boulevard Suite 203				
Fort Lauderdale, Florida 33308				
3. The mailing address (if different):				
4. Date of incorporation/qualification: 11/28/2006 / Documen	t number:P06000147284 /			
The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)				
Juan C Cruz				
1591 East Atlantic Boulevard Suite 100				
Pompano Beach, Florida 33060				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
Floridian Coastline Group Inc.				
2450 E Commercial Boulevard Suite 203				
P.O. Box NOT acceptable				
Fort Lauderdale, Florida 33308	· ·			
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.				
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the exproration has been notified in writing of the change.				
Juan	Carlos Cruz - President			
Signature of an officer or director	inted or typed name and title			
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.				
Signature of Registere Agem	October 28th, 2010 Date			
If signing on behalf of an entity:				
JUAN CARLOS CRUZ				
Typed or Printed Name				

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