P0800063229

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2008 DEC 31 AM 9: 10
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Florida Yacht Maintenance, Inc. (Name of Corporation	on)			
DOCUMENT NUMBER: P08000063229				
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:				
Andres Beltran				
(Name of Contact Per	rson)			
Florida Woolsh Mariaka				
Florida Yacht Maintenance, Inc. (Firm/Company)				
10935 SW 175th Street				
(Address)				
Miami, FL 33157 (City/State and Zip Code)				
For further information concerning this matter, please call:	,			
the same and the s				
Andres Beltran at (786) 499-3600 Area Code & Daytime Telephone Number)			
(Name of Contact Leison) (A	rea Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee, FL 32301			

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

1

statement of change is	ions of sections 607.0502, 617.0502, 6 submitted for a corporation organized	d under the laws of the State of <u>F</u>	lorida
in order to ch	ange its registered office or registered	d agent, or both, in the State of Fl	orida.
1. The name of the corp	poration: Florida Yacht Mainten	nance, Inc.	
2. The principal office	address: 10935 SW 175th Stree	et Miami, FL 33157	
3 The mailing address	(if different): same as above		
J. The maning address	(ii diniciono).		
4. Date of incorporatio	n/qualification: 07/01/2008	Document number: P08000	063229
	address of the current registered ager of State: (If resigned, enter resigned)	nt and registered office on file with	
Andr	res Beltran		TALL SEC
<u>154</u> 1	1 Sunset Drive		ZOUR DEC 31 SECRETAS TALLAHAS
Cora	ıl Gables, FL 33143		RY OF B
6. The name and street (if changed):	address of the new registered agent (if changed) and /or registered offic	"Ti
<u>Andı</u>	res Beltran		. P
<u>1093</u>	35 SW 175th Street		
•	(P.O Box NOT acceptable)		,
	ni, FL 33157		
The street address of i	its registered office and the street adentical.	dress of the business office of its	registered agent,
Such change was auth authorized by the boar	norized by resolution duly adopted b rd, or the corporation has been notif	y its board of directors or by an eled in writing of the change.	officer so
(Signature of an	officer or director	Andres Beltran, Pre	esident
I hereby accept the ap I further agree to com of my duties, and I am document is being file corporation has been	ppointment as registered agent and a ply with the provisions of all statute i familiar with and accept the obliga a merely to reflect a change in the r notified in writing of this change.	ngree to act in this capacity. Is relative to the proper and com Ition of my position as registered registered office address, I hereb	plete performance l agent. Or, if this y confirm that the
1		12-28-08	
(Signature o	of Registered Agent)	(Date)	
If signing on behalf of	f an entity:		
(Typed or	Printed Name)		
	* * * 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 (8/05)