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Division of Corporations

: (\$50)617-63B0 Fax Number

From:

2019 OCT 23

: FISHER, TOUSEY, LEAS & BALL Account Name

Account Number: I19990000021 : (904)356-2600 : (904)355-0233 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: bruce.zavon@zavontax.com

## REGISTERED AGENT CHANGE NAUTICAM USA, INC.

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Corporate Filing Menu

**MANUFOEDER** 

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute			
	ange is submitted for a corporation organized under the laws of the State of Florid		-	
	er to change its registered office or registered agent, or both, in the State of Florida	L		
1. The name of	the corporation: Nauticam USA, Inc			
2. The principa	l office address: 2303 North Andrews Ave			_
	nors FL 33311			_
3. The mailing	address (if different):C/o Zavon			_
	Ave Ste 940, Seattle WA 98101			_
4. Date of inco	rporation/qualification: 10/16/2009 Document number: P090000857	13		_
5. The name ar	id street address of the current registered agent and registered office on file with the atment of State: (If resigned, enter resigned)			
	Canon, Ryan K			
	1478 SW 18th Ter	<del>注</del> 於	19	
	Ft. Lauderdale FL 33312	-	.30	_
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	3.	23	 
	Fisher Tousey Leas & Ball, P.A.	·· ,	7	
	501 Riverside Ave Ste 600	<u>.</u> 3.	9:3	_
	P.O. Box NOT acceptable	2~ 151	<b>(B)</b>	
	Jacksonville FL 32202			
The street address changed will	ess of its registered office and the street address of the business office of its regis the identical.	tered age	:nt,	
Such change wanthorized by	as authorized by resolution duly adopted by its board of directors or by an officer board or the corporation has been notified in writing of the change.	<b>. 8</b> 0		
( )	Ryan K Canon			
<del>-</del>	the oppointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change.	zistered ess. 1	-	
Si	mature of Registered Agent.  Date		~	
If signing on b	chalf of an entity:			
Marvin (	Cyped 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 (03/12)