## P0900097014

(Re	questor's Name)	
(Ad	dress)	,
(Ad	dress)	
(Cit	ty/State/Zip/Phone	<del>(¥)</del>
·		
PICK-UP	■ WAIT	MAIL
/D.:	siness Entity Name	
(60	Siless Endly Name	<del>2</del> )
(Do	ocument Number)	
Certified Copies	_ Certificates of	of Status
		,
Special Instructions to	Filing Officer	
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SERRETURE OF STAFE

NOV 1 0 2016 C. CARROTHERS

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Change of Registered Office

Name of Corporation

DOCUMENT NUMBER

209000097014

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:

## Shonda A Stebleton

Name of Contact Person

Atlas Towing Salvage & MARINE Services, Inc.

Firm/Company

645 S. Beach Street

Address

Daytona Beach, FL 32114

City/State and Zip Code

Shonda@TowBoatUSNEFlorida.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shonda Stebleton

<sub>.</sub>,386 \ 405-8023

Name of Contact Person

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

	-	.0502, 607.1508, or 617.1508, Florida Statutes, this rganized under the laws of the State of Florida	<del></del>
in ord	der to change its registered office or re	gistered agent, or both, in the State of Florida.	
1. The name o	f the corporation: Atlas Towing S	Salvage & Marine Services, Inc.	
		I., Ste #101, Jacksonville Beach, FL 32250	
3. The mailing	address (if different): 4899 Fron	Street, Ponce Inlet, FL 32127	
	4.4.00.000	D0000007044	
4. Date of inco	orporation/qualification: 11/30/200	Document number: P09000097014	
	nd street address of the current register artment of State: (If resigned, enter res	red agent and registered office on file with the igned)	27
	B. Scott Stebleton		ZEIE NOV
	4899 Front Street, Ponce Inlet, FL 32127		
	2305 Beach Blvd., Ste #101	· · · · · · · · · · · · · · · · · · ·	PH (
6. The name ar (if changed)	_		90 5:
	B. Scott Stebleton		
	645 S. Beach Street, Day	rtona Beach, FL 32114	
	P.O. Box	NOT acceptable	
The street add as changed wi	ress of its registered office and the still be identical.	reet address of the business office of its registered ag	ent,
Such change v	was authorized by resolution duly ado the board, or the corporation has been	pted by its board of directors or by an officer so inotified in writing of the change.	
Mone	fure of an officer or affector little	Shonda A. Stebleton Printed or typed name and title	_
I hereby accep I further agree performance of agent. Or, if t	ot the appointment as registered agen to comply with the provisions of all of my duties, and I am familiar with a	t and agree to act in this capacity. statutes relative to the proper and complete nd accept the obligation of my position as registered reflect a change in the registered office address. I	
Bacott	Stille	11/03/2016	_
	ignature of Registered Agent	Date	
	pehalf of an entity:		
B. Scott S	Typed or Printed Name		
	1) pou oi 1 mileu 7 mile		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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