## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## REGISTERED AGENT CHANGE MAROLAX NAPLES INC.

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(((H11000281930 3)))

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

	e provisions of sections 607.0502, 617 nange is submitted for a corporation o		— · · · · · · ·
	ler to change its registered office or re		
1. The name of	f the corporation: Marolax Naple	es Inc.	
2. The principa	al office address: 9000 Gulfshore I	Drive, Naples, Florida 34108	<u> </u>
3. The mailing	address (if different):		
4. Date of incor	rporation/qualification: 12/23/20	009 Document number:	P09000102470
	nd street address of the current register artment of State: (If resigned, enter res		ile with the
	Robert Woitzik		ø.
	9000 Gulfshore Drive, Naple	es, Florida 34108	7 ST
			- COR
6. The name an (if changed):	nd street address of the new registered	agent (if changed) and /or registere	ZOIL DEC -1 PH TALLAHASSEE. F
	R&A Agents, Inc.		
	c/o Stephen E. Thompson, A	Assistant Secretary	2:51 FLORID
	850 Park Shore Drive, Naple	es, Florida 34103	
The street addr	ress of its registered office and the st	reet address of the business office	of its registered agent,
	as authorized by resolution duly additionard or the corporation has been	opted by its board of directors or to a notified in writing of the change	oy an officer so
Signati	are of an officer or director	It's Authorized Age	nt and title
hereby accept further agree of my duties, ar document is be corporation na	t the appointment as registered agen to comply with the provisions of all nd I am familiar with and accept the aig filed merely to reflect a change i is been notified in writing of this cha	nt and agree to act in this capacity statutes relative to the proper and obligation of my position as regi in the registered office address, I nge.	, d complete performance stered agent. Or, if this hereby confirm that the
	S 35	December 1, 2011	
Sk	greaters of Registered Agent	Date	
-	ehalf of an entity:		
Stephen E.	Thompson  Typed or Printed Name		
	••	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)