P10000011751

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TO: A

Amendment Section Division of Corporations

SUBJECT: Total Marine of Florida, Inc

Name of Corporation

DOCUMENT NUMBER: P10000011751

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

John Caruso

Name of Contact Person

Total Marine of Florida, Inc.

Firm/Company

896 N Federal Hwy # 332

Address

Lake Worth, FI 33462

City/State and Zip Code

jrenfrow@totalmarine.com

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

For further information concerning this matter, please call:

James Renfrow

,954

614-7816

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

statement of ch	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florid on organized under the laws of the State	of Florida
		or registered agent, or both, in the State	of Florida.
1. The name of	the corporation: Total Marine	e of Florida, Inc.	
2. The principa	l office address: 850 NE 3rd	Ave Ste 206C, Dania Beach	, FL 33004
3. The mailing	address (if different):		
4. Date of incom	rporation/qualification: 2010	Document number: P10	000011751
	d street address of the current regartment of State: (If resigned, ente	gistered agent and registered office on file er resigned)	with the
	James Renfrow		TA OCT IN
	1341SW 17th St		me was
	Boca Raton, FL 33486	3	
6. The name an (if changed):		ered agent (if changed) and /or registered	麗社 出 office。
	John Caruso		
	896 N Federal Hwy #	332	
		. Box NOT acceptable	_
	Lake Worth, FL 33462		
The street addr as changed will	ress of its registered office and the identical,	ne street address of the business office of	f its registered agent,
Such change w authorized by	as authorized by resolution duly beard, or the corporation has	adopted by its board of directors or by a been notified in writing of the change.	an officer so
Symath	upe of an officer or director	James Ronkon Sac Printed or typed name and	tres.
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered a to comply with the provisions of f my duties, and I am familiar with its document is being filed merely that the corpopation has been no	ngent and agree to act in this capacity. I all statutes relative to the proper and c th and accept the obligation of my posit y to reflect a change in the registered of otified in writing of this change.	omplete ion as registered flice address, I
Jo.	hu Harrist	10/9/14	
0	enature/of Rogistered Agent	Daté	
If signing on be	chalf of an entity:		
\ <u>/º/\//</u> T	voed or Printed Name	_	

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