

P13 0000067130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

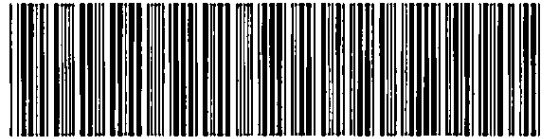
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RA change

10/26/21--01015--005 **35.00

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2021 OCT 26 AM 10:38

STATE OF MISSISSIPPI

NOV 05 2021

A. RAMSEY

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A. RAMSEY

McDermott & Thacker, P.A.

Attorneys at Law

791 WEST LUMSDEN ROAD, BRANDON, FLORIDA 33511
TELEPHONE (813) 684-3131 ♦ FACSIMILE (813) 654-0052

MICHAEL J. McDERMOTT
michael.mtfirm@gmail.com

RICKY L. THACKER
ricky.mtfirm@gmail.com

October 19, 2021

*Via Certified U.S. Mail/
Return Receipt Requested*
#9290 7902 5895 9303 0007 76

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Yacht Lifters, Inc.
Our File No.: 21-0004(B)\Spitler

Gentlemen:

Enclosed please find an original and a copy of Statement of Change of Registered Office or Registered Agent or Both for Corporations and my general office account check in the amount of \$35.00.

Please file and certify the Statement of Change of Registered Office or Registered Agent or Both for Corporations and return the filed copy to this office in the self-addressed stamped envelope provided for that convenience.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

Michael J. McDermott

Michael J. McDermott, Esquire

MJM\tmp

Enclosures

Dictated by Michael J. McDermott and mailed
without his review to avoid further delay.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: YACHT LIFTERS, INC.
Name of Corporation

DOCUMENT NUMBER: P13000067130

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:

Michael J. McDermott, Esquire

Name of Contact Person

McDermott & Thacker, PA

Firm/Company

791 W. Lumsden Rd.

Address

Brandon, FL 33511

City/State and Zip Code

austin@yachtlifters.com

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

For further information concerning this matter, please call:

Michael J. McDermott, Esquire

Name of Contact Person

at (813) 684-3131
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: YACHT LIFTERS, INC.
2. The principal office address: 1126 S. Federal Highway, Suite 150, Ft. Lauderdale, FL 33315
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08-14-2013 Document number: P13000067130
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

David McGowan

1126 S. Federal Highway Suite 150

Ft. Lauderdale, FL 33315

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Austin Spittler

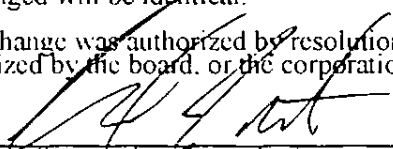
1126 S. Federal Highway Suite 150

P.O. Box NOT acceptable

Ft. Lauderdale, FL 33315

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

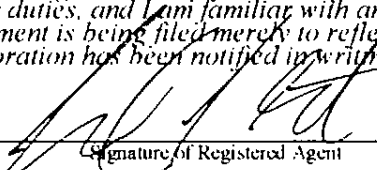
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

AUSTIN SPITLER

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

09-30-2021

Date

If signing on behalf of an entity:

AUSTIN SPITLER

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 (04/13)

FILED
2021 OCT 26 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FL