| (R | equestor's Name) | · | | |
|---|---------------------|-----------------|--|--|
| (A | ddress) | | | |
| (A | ddress) | | | |
| (C | ity/State/Zip/Phone | ; #) | | |
| PICK-UP | WAIT | MAIL | | |
| (В | usiness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | , | | | |
| | | <u> </u> | | |





900278664599

DEC 01 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: 360 Yacht Inc.

Name of Corporation

DOCUMENT NUMBER: P14000078033

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:

Nick Athanassiadis

Name of Contact Person

360 Yacht Inc.

Firm/Company

1915 SW 21st Avenue

Address

Ft. Lauderdale, FL 33312

City/State and Zip Code

nick.athanassiadis@360yacht.com

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

For further information concerning this matter, please call:

Nick Athanassiadis

,_/626 \318-339

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

| | | 502, 607.1508, or 617.1508, Florida Statut anized under the laws of the State of Florid | | _ |
|--|--|--|---|-----------|
| · · · · · · · · · · · · · · · · · · · | | stered agent, or both, in the State of Florid | a, | |
| 1. The name of | the corporation: 360 Yacht Inc. | ··· | | |
| | office address: 1915 SW 21st Averdale, FL 33312 | venue | | |
| 3. The mailing a | ddress (if different): | | | |
| 4. Date of incorp | te of incorporation/qualification: Document number: P140 | | 8033 | |
| 5. The name and | | agent and registered office on file with the | | |
| | Nick Athanassiadis | | | |
| | 3012 NE Quayside Ln | | | |
| | Miami, FL 33138 | | | |
| 6. The name and street address of the new registered (if changed): | | ent (if changed) and /or registered office | * * * * * 4* * | |
| | Nick Athanassiadis | | \$ 6 V | $p_{i,j}$ |
| | 3236 McDonald Street | | 14.7 | P |
| | Miami, FL 33133 | OT acceptable | 7 G N N N N N N N N N N N N N N N N N N | 3: 22 |
| The street address changed will | ss of its registered office and the stree be identical. | t address of the business office of its regis | stered age | nt, |
| Such change was a sith bristed by the | as authorized by resolution duly adopte ne board, or the corporation has been n | d by its board of directors or by an office of the direction of the change. | r so | |
| 1/-/-1/1 | | Nick Athanassiadis | | _ |
| I hereby/accept I further agree performancement | my duties, and am familiar with and | Printed or typed name and title and agree to act in this capacity, tutes relative to the proper and complete accept the obligation of my position as re flect a change in the registered office add in writing of this change. | paistered | |
| 111-1 | | October 27, 2015 | | |
| Sig | nature of Registored Agent | Date | | - |
| If signing on be | half of an entity: | | | |
| T | yped or Printed Name | | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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