P15000092093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

C. GOLDEN

NOV 20 2018

# COVER LETTER

**TO:** Amendment Section
Division of Corporations

**SUBJECT:** All Around Boat Rentals, Inc
Name of Corporation

**DOCUMENT NUMBER:** P15000092093

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:

Vincent T Biasella
Name of Contact Person

All Around Boat Rentals, Inc
Firm/Company

4313 SW 19th Ave
Address

Cape Coral, FL 33914
City/State and Zip Code

aaboatrentals@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vincent T Biasella at (239) 257-3329
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**

*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: All Around Boat Rentals, Inc

2. The principal office address: 4313 SW 19th Ave Cape Coral, FL 33914

3. The mailing address (if different):

4. Date of incorporation/qualification: 11/9/2015 Document number: P15000092093

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)

Bryan J. Biasella

4913 SW 25th CT

Cape Coral, FL 33914

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TALLAHASSEE, FL

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

Vincent T Biasella

4313 SW 19th Ave.

P.O. Box NOT acceptable

Cape Coral, FL 33914

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.

Laura K Biasella
Signature of an officer or director

Laura K. Biasella
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.*

Vincent T Biasella
Signature of Registered Agent

11/8/2018
Date

If signing on behalf of an entity:

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 (03/12)