Paa000031983

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
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J. HORNE
JUL 25 2023
JUL 2 3 2023

Office Use Only



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COVER LETTER

TO:	Amendment Section Division of Corporations	e e e e e e e e e e e e e e e e e e e
SUBJ Name	ECT: Change of Registered Agent of Corporation	
DOCU	JMENT NUMBER: P22000037983	***
The er	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	s matter to the following:
Gary N	4. Levin	
Name	of Contact Person	
CAPT	AIN G'S BOATERS EDUCATION AND CH	ARTERS CORP.
Firm/C	Company	
1600 S	W 1st Ave, Apt. 1103	
Addre	ss	
Miami	. FL 33129	
City/S	tate and Zip Code	
	glevin60@gmail.com	
E-mai	I address: (to be used for future annua	report notification)
	•	,
For fu	rther information concerning this matter, p	please call:
Gary N	4. Levin	at (305 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Name of Contact Person	at (305) 988-6113 Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the	
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.050 inge is submitted for a corporation orgai r to change its registered office or regist	nized under the laws of the State of Fl	orida
1. The name of t	the corporation: CAPTAIN G'S BOATER	S EDUCATION AND CHARTERS CO	RP.
	office address: 1600 SW 1st Ave, Apt. 11		
3. The mailing a	ddress (if different): Same		
	poration/qualification: 05/04/2022	Document number: P220000379	983
	I street address of the current registered a timent of State: (If resigned, enter resigned		the
	ZENBUSINESS INC.		77
	336 E. COLLEGE AVE., Suite 301		2023 H SECOR
	TALLAHASSEE, FL 32301		
6. The name and (if changed):	I street address of the new registered age	ent (if changed) and /or registered offic	c
	Gary M. Levin		(
	1600 SW 1st. Ave, #1103, Miami, FL 331	129	
	P.O. Bo	x NOT acceptable	
-	ess of its registered office and the street be identical. as authorized by resolution duly adopte the board, or the corporation has been no		
	ne board, or the corporation has been no		
100	of an officer or director	Gary M. Levin Printed or typed name and title	denl
I further agree to of my duties, an document is bei	the appointment as registered agent an to comply with the provisions of all stat d I am familiar with and accept the obl ng filed merely to reflect a change in th s been notified in writing of this change	nd agree to act in this capacity, tutes relative to the proper and comp ligation of my position as registered of he registered office address, I hereby	lete performance
Sa	MMI	5 /8/2023	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Gary M. Levin			
	yped or Printed Name		

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