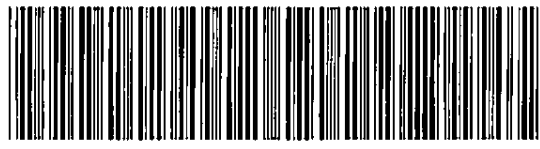


P22000055996



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11/27/23--01031--010 \*\*35.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

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(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** JMS Yachting USA, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P22000055996

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:

Nicholas Gray  
Name of Contact Person  
JMS Yachting USA, Inc.  
Firm/Company  
1019 S.E. 17th Street  
Address  
Fort Lauderdale, Florida 33316  
City/State and Zip Code  
nick@jmsyachting.com

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

For further information concerning this matter, please call:

Nicholas Gray at ( 305 ) 562-3364  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 15, 2023

NICHOLAS GRAY  
1019 S.E. 17TH STREET  
FORT LAUDERDALE, FL 33316

SUBJECT: JMS YACHTING USA INC.  
Ref. Number: P22000055996

We have received your document for JMS YACHTING USA INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 123A00028582

**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: JMS Yachting USA, Inc.

2. The principal office address: 1019 S.E. 17th Street Fort Lauderdale, FL 33316

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 07/08/2022 Document number: P22000055996

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)

Randy Rosa - Goldman & Rosa, P.A.

320 Southeast 18th Street

Fort Lauderdale, FL 33316

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

Nicholas Gray - JMS Yachting USA, Inc.

1019 S.E. 17th Street

P.O. Box NOT acceptable

Fort Lauderdale, FL 33316

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TALLAHASSEE FLORIDA

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.

Nicholas Gray  
Signature of an officer or director

Nicholas Gray, President  
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.

Nicholas Gray  
Signature of Registered Agent

28 / DEC / 2023  
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