

P93000024002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

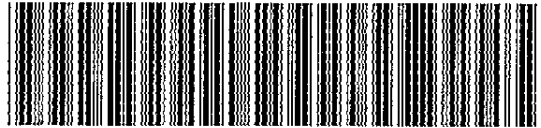
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Charge

G. Gouffette MAR 18 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Oviatt Marine, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P93000024002

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:

James Oviatt

(Name of Contact Person)

Oviatt Marine, Inc.

(Firm/Company)

802 NE 20th Ave.

(Address)

Ft. Lauderdale, FL 33304

(City/State and Zip Code)

For further information concerning this matter, please call:

James Oviatt

(Name of Contact Person)

at (954) 760-6222

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 10, 2008

JAMES OVIATT
OVIATT MARINE, INC.
802 NE 20TH AVE
FT. LAUDERDALE, FL 33304

SUBJECT: OVIATT MARINE, INC.
Ref. Number: P93000024002

We have received your document for OVIATT MARINE, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 508A000145

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 MAR 17 AM 8:00

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**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 _____
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Oviatt Marine, Inc.
2. The principal office address: 802 NE 20th Ave. Ft. Lauderdale, FL 33304
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1993 Document number: P93000024002
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

James Oviatt

850 NE 3rd ST. Suite 201 Dania, FL 33004

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

- James G. Oviatt

802 NE 20th Ave.

(P.O. Box NOT acceptable)

Ft. Lauderdale, FL 33304

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.

James G. Oviatt
(Signature of an officer or director)

JAMES G. OVIATT
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity,
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)

(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 (8/05)

FILED
08 MAR 18 AM 8:43
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TALLAHASSEE, FLORIDA