

P97000023015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

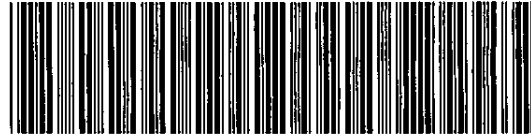
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300264143153

09/15/14--01018--023 \*\*35.00

FILED  
14 SEP 15 PM 1:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CRM  
9-22-14

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dolphin Cruises, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P97000023015

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:

Felicia Henderson

Name of Contact Person

Matthews & Jones, LLP

Firm/Company

4475 Legendary Drive

Address

Destin, FL 32541

City/State and Zip Code

wendy@southernstardolphincruise.com

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

For further information concerning this matter, please call:

Felicia Henderson

Name of Contact Person

at ( 850 ) 837-3662

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

**FILED**  
14 SEP 15 PM 1:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Dolphin Cruises, Inc.
2. The principal office address: 100 Harborwalk Blvd., Unit A, Destin, FL 32541
3. The mailing address (if different): P.O. Box 1713, Destin, FL 32540
4. Date of incorporation/qualification: 03/07/1997 Document number: P97000023015
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)

David S. Wilson

66 Indian Bayou Drive

Destin, FL 32541

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

David S. Wilson

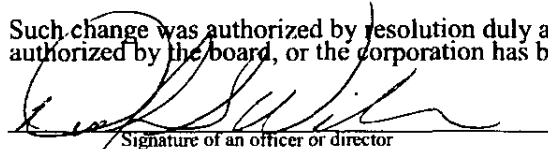
662 Harbor Blvd., Unit 240

P.O. Box NOT acceptable

Destin, FL 32541

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.

  
Signature of an officer or director

David S. Wilson

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.*

\_\_\_\_\_  
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 (03/12)

FILED  
14 SEP 15 PM 1:47  
TALLAHASSEE, FLORIDA  
FLORIDA DEPARTMENT OF STATE