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COVER LETTER

TO: Amendment Section Division of Corporations

FLAGSHIP MARINE, INC. Name of Corporation

P97000092556

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:

John Copeland

Name of Contact Person

Kramer, Sopko & Copeland, P.A.

Firm/Company

411 S.E. Osceola Street, Suite 200

Address

Stuart, Florida 34994

City/State and Zip Code

jcopeland@kscattorneys.com

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

For further information concerning this matter, please call:

Tracy Barnes

at (772) 288-0048 x301 Area Code & Daytime Telephone Number

Name of Contact Person

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

statement of change is submitted for a cor	.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this poration organized under the laws of the State of Florida of Storida.	
	ship Marine, Inc.	
-	S.E. Dixie Highway	
· · ·	rt, Florida 34996	
3. The mailing address (if different):	same	
4. Date of incorporation/qualification:1	0/27/1997	
5. The name and street address of the curre Florida Department of State: (If resigne	ent registered agent and registered office on file with the d, enter resigned)	
Kramer, Sopko &	Levenstein, P.A.	
2300 S.E. Monter	ey Road, Suite 100	
Stuart, Florida 34996		
(if changed): Kramer, Sopko &	19-1	
411 S.E. Osceola	Street, Suite 200 P.O. Box NOT acceptable	
Stuart, Florida 34		
	and the street address of the business office of its registered agent.	
Such change was authorized by resolution authorized by the board, or the corporation	n duly adopted by its board of directors or by an officer so on has been notified in writing of the change.	
Signification of the or director	Thomas Martland ::	
I hereby accept the appointment as regist I further agree to comply with the provisi performance of my duties, and I am famil	ered agent and agree to act in this capacity. ons of all statutes relative to the proper and complete iar with and accept the obligation of my position as registered merely to reflect a change in the registered office address, I been notified in writing of this change.	
	10/15/19	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
John K. Copeland, Esquire		

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

Typed or Printed Name