

P97000102123

Requester's Name

Address

No ret address

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

2. _____ 200005288972--0
(Corporation Name) (Document #) -04/17/02--01027--010
*****35.00 *****35.00

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☒ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
02 MAY -1 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials

W5-3



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

April 19, 2002

DONALD MITCHELL
2101 W. STATE ROAD 434, STE 221
LONGWOOD, FL 32779

SUBJECT: DIVEDEPOT.COM, INC.
Ref. Number: P97000102123

We have received your document for DIVEDEPOT.COM, 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The capacity of the person signing the document must be typed or printed beneath or opposite the 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) 245-6908.

Anna Chesnut
Corporate Specialist

Letter Number: 502A00023671

RECEIVED
02 MAY - 1 AM 9:17
DIVISION OF CORPORATIONS

**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 617.1509, Florida Statutes,
the undersigned corporation organized under the laws of the State of Florida
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.

1. The name of the corporation : Dive Depot.com, Inc.

2. The mailing address of the corporation : 2101 W. State Rd. 434, Ste. 221,
Longwood, FL 32779

3. Date of incorporation/qualification: _____ Document number: _____

4. The name and address of the current registered agent and office:

Norbert Weller
~~2101 W. State Rd. 434, Ste 221~~ 490 PINE OAK PL
Longwood, FL 32779 Ste 200

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

Donald Mitchell
2101 W. State Rd. 434, Ste. 221
Longwood, FL 32779

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.

Donald A. Mitchell
(Signature of an officer, chairman or vice chairman of the board)

8-13-01
(Date)

Donald A. Mitchell Director
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Donald A. Mitchell
(Signature of Registered Agent)

8-13-01
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

FILED
02 MAY - 1 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA