

P98000000465

Requester's Name
759 8 Fed Hwy Ne 217
Address
Stuart, FL 34994
City/State/Zip Phone #

Office Use Only

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

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

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-01/16/01--01083--001
****140.00 ****35.00

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JAN 16 AM 11:44

FILED

Examiner's Initials

AL 1-19-01

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.1508, or 617.1508, 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: Black Marlin Investments, Inc.

2. The mailing address of the corporation: 759 S. Federal Highway, Suite 217, Stuart, FL 34994

3. Date of incorporation/qualification: 01/02/1998 Document number: P98000000465

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

Theodore G. Glasrud

3354 S.E. Fairway East

Stuart, FL 34997

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

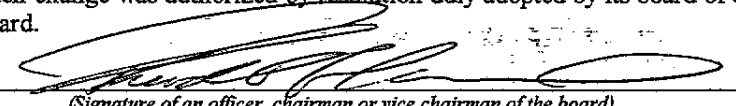
Theodore G. Glasrud

759 S. Federal Highway, Suite 217

Stuart, FL 34994

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.


(Signature of an officer, chairman or vice chairman of the board)

1-1-01
(Date)

(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.


(Signature of Registered Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

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

DIVISION OF CORPORATIONS

P.O. BOX 6327

TALLAHASSEE, FL 32314

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01-JAN-16 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
1-1-01
(Capacity)