KEY LARGO, F	E 33037			
Current Mai	ling Address:			
12 SNIPE RI	-			
KEY LARGO				
FEI Number: 65-1132526		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
BROWN, VAN 12 SNIPE ROAI KEY LARGO, F				
The above named	l entity submits this statement for the purpose of changing its regi	stered office or regis	ered agent, or both, in the State of Flo	rida.
	l entity submits this statement for the purpose of changing its regi : VAN BROWN	stered office or regis	ered agent, or both, in the State of Flo	^{rida.} 09/29/2017
		stered office or regis	ered agent, or both, in the State of Flo	
SIGNATURE	Electronic Signature of Registered Agent	stered office or regis	ered agent, or both, in the State of Flo	09/29/2017
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent	stered office or regis	vered agent, or both, in the State of Flo	09/29/2017
SIGNATURE Officer/Dire	VAN BROWN Electronic Signature of Registered Agent ctor Detail :			09/29/2017
SIGNATURE Officer/Direc Title	Electronic Signature of Registered Agent Ctor Detail : P	Title	VP	09/29/2017
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P BROWN, VAN J	Title Name	VP VEDDER, JOHN E 117 NAUTICAL DRIVE	09/29/2017
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P BROWN, VAN J 12 SNIPE ROAD	Title Name Address	VP VEDDER, JOHN E 117 NAUTICAL DRIVE	09/29/2017
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P BROWN, VAN J 12 SNIPE ROAD	Title Name Address	VP VEDDER, JOHN E 117 NAUTICAL DRIVE	09/29/2017
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P BROWN, VAN J 12 SNIPE ROAD	Title Name Address	VP VEDDER, JOHN E 117 NAUTICAL DRIVE	09/29/2017

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VAN BROWN

PRESIDENT

09/29/2017

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P01000084720

Entity Name: TROPICAL OF KEY LARGO, INC.

2017 FLORIDA PROFIT CORPORATION REINSTATEMENT

Current Principal Place of Business:

12 SNIPE RD.

FILED Sep 29, 2017 Secretary of State CR2049029179

Date