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.

VP

DOCUMENT# P02000135660

Entity Name: OFFSHORE ADVENTURES OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

11200 SW 304 ST HOMESTEAD, FL 33033

Current Mailing Address:

815 N. HOMESTEAD BLVD. BOX#426 HOMESTEAD, FL 33030

FEI Number: 52-2386826

Name and Address of Current Registered Agent:

VALDES, ERNEST 11200 SW 304 ST HOMESTEAD, FL 33033 US Certificate of Status Desired: Yes

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	VP	Title	Ρ	
Name	VALDES, APRIL A	Name	VALDES, ERNEST	
Address	11200 SW 304 ST	Address	11200 SW 304 ST	
City-State-Zip:	HOMESTEAD FL 33033	City-State-Zip:	HOMESTEAD FL 33033	

Electronic Signature of Signing Officer/Director Detail

FILED Apr 17, 2019 Secretary of State 0947894138CC

> 04/17/2019 Date

Date