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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. SIGNATURE: MATTHEW BIRR MGRM 01/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L08000022386

Entity Name: BOAT LIFT TECHNICIANS, LLC

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

630 LOVEJOY RD FT. WALTON BEACH, FL 32548

Current Mailing Address:

810 EGLIN PKWY UNIT 10 FORT WALTON BEACH, FL 32547 US

FEI Number: 26-2096882

Name and Address of Current Registered Agent:

BIRR, MATTHEW 810 EGLIN PKWY NE UNIT 10 FT. WALTON BEACH, FL 32547 US

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

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	BIRR, MATTHEW A	Name	BIRR, JOSEPH
	UNIT 10	Address	115 NORTHERN PINE RD.
		City-State-Zip:	FT. WALTON BEACH FL 32547

FILED Jan 06, 2017 Secretary of State CC6401344611

Certificate of Status Desired: Yes

01/00/2

Date

Date