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FILED 2017 APR 17 AM 9.39 SECRETARY OF STATE TALLAHASSEE, FLORIGA

K. SALY APR 1 9 2017

COVER LETTER

TO:	Registration Se Division of Cor					
	A&E Quali					
Name of Limited Liability Company						
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		Anthony Laferrara				
		 .	Name of Person			
			Firm/Company	<u> </u>		
		111 Ed Padgett Rd.				
			Address			
		Lakeland, FL. 33809				
	City/State and Zip Code aequalitymarine@yahoo.com					
			to be used for future annual report notifi	cation)		
For fur	ther information co	oncerning this matter, please c	all:			
Anthor	ny Laferrara		863 272-2704			
Name of Person		f Person	at () Area Code Daytime	Telephone Number		
Enclose	ed is a check for th	e following amount:				
S \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2017 APR 17 AM 9. 39
TALLAHASSEE, FLORIDA

A&E Quality Maine LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	y were filed on April 10, 2017	and assigned	
Florida document number L17000080230			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
A&E Quality Marine LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:	ffice address on our records, <u>enters</u> :	er the name of the nev	
New Registered Office Address:			
Enter Florida street address			
	, Florida	Zip Code	
N. P. L. I.A. d.Cl	Ony	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	-		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I are provided for in Chapter 605, F.S. C	n familiar with and Or, if this document is	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager 2817 APR 17 AM 9:39 AMBR = Authorized Member SECRETARY OF STATE TALLAHASSEE. FLORIDA Type of Action <u>Title</u> <u>Name</u> **Address** □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove _□ Change _ Add _□ Remove ☐ Change □ Add _□ Remove _ Change _□ Add □ Remove

☐ Change

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ective date, if other than the date of filing:	o date of filing or more than 90 days after filing.) Pursuant to 605.0207
te: If the date inserted in this block does not meet the applica cument's effective date on the Department of State's records.	ble statutory filing requirements, this date will not be listed as
cament's effective date of the Department of State's records.	
record specifies a delayed effective date, but not The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier of
ted April 14, 2017	
1/1	_
UW /C	rized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00