5/17/22, 1:25 PM *

Division of Corporations



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To:

Division of Corporations

Page: 2 of 6

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Page: 3 of 6

COVER LETTER

TO:	Registration Sec Division of Corp	tion porations						
ern me		RS CHARTERS L.L.C						
SUBILL	1;	Name of Limit	ed Liability Company	·····				
The enclo	osed Articles of A	Amendment and fee(s) are subm	nitted for filing.					
Please re	tum all correspor	ndence concerning this matter to	the following:	·				
		Cheyenne Moseley						
			Name of Person					
For furth Cheyenr		Legalzoom.com, Inc.						
			Firm/Company					
		101 N Brand Blvd 11th Fl						
SUBJECT The enclose Please return Cheyenne Enclosed in	`		Address					
		Glendale, CA 91203	•			202		
		cricodellmathewson@gmail.	City State and Zip Code			2022 HAY 17		
		₩ =	be used for future annual report notifies	tiou)		17		
For furth	er information co	oncerning this matter, please cal	II:		·			
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11	Name of	f Petson	Area Code Daytime T	elephone Number	•	Ф		
Enclosed	l is a cheek for th	ne following amount:		•				
□ \$ 25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &			
	Registr	ING ADDRESS:	STREET/COURIEI Registration Section Division of Cornerati	4				

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

LegalZoom.com, Inc.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

			墨	-
		1-1/-, 2-1		
(Name of the Limited Liability (A Florida Li	Company as It now appears on our records.) united Liability Company)		17 -	
	npany were filed on 10/22/2021	and a	assigned	1
Florida document number L21000460017			է9	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	d liability company here:			
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the	e abbreviation '	"L.L.C."	
Enter new principal offices address, if applicable:			· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET ADDRE	(SS)			
	•			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				—
B. If amending the registered agent and/or registe	red office address on our records, en	ter the nan	ie of th	ie new
registered agent and/or the new registered office addre	ss nere:			
Name of New Registered Agent:				
New Registered Office Address:				
•	Enter Florida street address			
	, Florida		1	
	City	Zip Co	de	

New Registered Agent's Signature, if changing Registered Agent:

Page: 4 of 6

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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 AMBR = Authorized Member

To: +18506176383

<u>Title</u>	Name	Address	Type of Action
AMBR	Christopher Davis	28509 Jolly Roger Dr Summerland Key, FL 33042	■ Add
			☐ Remove
			□ Change
AMBR	Heath C. Smiley	28509 Jolly Roger Dr Summerland Key, FL 33042	■ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			Add
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Page: 6 of 6

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