



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 5, 2023

STEWART DAVIS
BOCA PADDLE LLC
9657 VESCOVATO WAY
BOCA RATON, FL 33496

SUBJECT: BOCA PADDLE LLC
Ref. Number: L23000315099

We have received your document for BOCA PADDLE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Valerie Herring
Regulatory Specialist III
Internet Support

Letter Number: 423A00020270

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Boca Paddle 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 were filed on 6/30/2023 and assigned
Florida document number L23000315099.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
City Zip Code

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

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

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|--------------------|------------------------------|--|
| MGR | Malerine IV LLC | 6820 Lyons Technology Circle | <input checked="" type="checkbox"/> Add |
| | | Suite 100 | <input type="checkbox"/> Remove |
| | | Coconut Creek, FL 33073 | <input type="checkbox"/> Change |
| MGR | Skymackel LP | 2599 NW 63rd Lane | <input checked="" type="checkbox"/> Add |
| | | Boca Raton, FL 33496 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | SBD Consulting Inc | 9657 Vescovato Way | <input checked="" type="checkbox"/> Add |
| | | Boca Raton, FL 33496 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Davis, Stewart | 9657 Vescovato Way | <input type="checkbox"/> Add |
| | | Boca Raton, FL 33496 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Mbr LLC | 461 South Maya Palm Drive | <input checked="" type="checkbox"/> Add |
| | | Boca Raton, FL 33432 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

2023 SEP 15 AM 9:04
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TALLAHASSEE

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 2

2023

Signature of a member or authorized representative of a member

Stewart Davis

Typed or printed name of signee

Filing Fee: \$25.00