

5/3/24 8:35 AM

Division of Corporations

L23000467730

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H24000194204 3)))



H240001942043AEC

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Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: rllops@parasec.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KAPENAS TOP YACHT CAPTAINS LLC

Certificate of Status	0
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M. SOLOMON

JUN - 5 2024

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June 4, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KAPENAS TOP YACHT CAPTAINS LLC
2079 NORTHEAST 54TH COURT
FORT LAUDERDALE, FL 33308US

SUBJECT: KAPENAS TOP YACHT CAPTAINS LLC
REF: L23000467730

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted is incomplete, missing the second page (manager changes page). Even if no changes, it must be submitted with the document.

Please return 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) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H24000194204
Letter Number: 724A00012029

RECEIVED
FLORIDA DEPARTMENT OF STATE
JUN 5 2024

2024 JUN -5 AM 9:57

FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Kapenas Top Yacht Captains 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 10/11/2023 and assigned
Florida document number L23000467730

This amendment is submitted to amend the following:

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

Kapenas LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

SAME AS BEFORE

(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.

City

Florida

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.

County of DADE

On this 31st day of MAY 2024

before me personally appeared

Heather Simpson

to me known to be the person who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

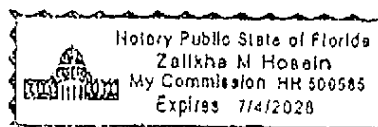
Notary (signed)

NOTARY PUBLIC

NO CHANCE TO AGENT
BUSINESS NAME CHANGE ONLY

If Changing Registered Agent, Signature of New Registered Agent

Heather Simpson



FILED

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

NAME CHANGE ONLY OF BUSINESS

FILED

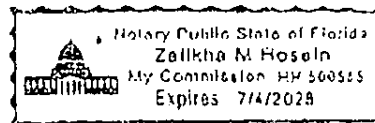
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STATE OF FLORIDA
DEPARTMENT OF STATE

E. Effective date, if other than the date of filing: MAY 31, 2024 (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 605.0287 (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 date the record is filed.

Dated May 15th 2024



Signature of a member or authorized representative of a member

Heather Simpson

Typed or printed name of signer

STATE OF FLORIDA
COUNTY OF DADE
On this 15th day of MAY, 2024,
before me personally appeared Heather Simpson,
known to me or the person who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

NOTARY PUBLIC