## L090W114132

(Re	equestor's Name)	
(Ad	dress)	·
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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**EXAMINER** 

## **COVER LETTER**

Registration Section

Division of	Corporations			
SUBJECT:	Adamant Marine	Global Engineering LLC	· ·	
		ited Liability Company		
	s of Amendment and fee(s) are su	<u>-</u>	OHR!	
Please return all corr	espondence concerning this matte	r to the following:	ER T	
		Michael Cassell Name of Person		
	Adamant I	Marine Global Engineering l		
		Firm/Company		
	2	2365 SW 34th St. Ste 5 Address		
	Fo	rt Lauderdale, FL 33312		
	cor	City/State and Zip Code p@adamantmarine.com		
For further informati	E-mail address: on concerning this matter, please	to be used for future annual report notif	ication)	
22 82 84	P. Cont.		000 4400	
Michael Cassell Name of Person		at ( 954 ) Area Code & Daytim	889-4408 c Telephone Number	
Enclosed is a check t	or the following amount:			
\$25.00 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/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on ations enter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Adamant Marine Global Engineering 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 Dece	ember 01, 2009	and assigned
Florida document numberL	09000114132			
This amendment is submitted to ame	ū			
A. If amending name, enter the no	ew name of the limited liabil	ity company here:		
The new name must be distinguishable "L.L.C."	and end with the words "Limite	ed Liability Company,'	' the designation "LLC"	or the abbreviation
Enter new principal offices addres	s, if applicable:			
(Principal office address MUST BE	A STREET ADDRESS)			
Enter new mailing address, if appl	licahle:			
(Mailing address MAY BE A POST				
12.2				
B. If amending the registered a registered agent and/or the new re			records, enter the 1	name of the new
Name of New Registered A	Agent:	·		
New Registered Office Ad	dress:			
		Enter Florida street address		
			, Florida	<del></del>
		City	Z	ip 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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
MGRM	Benjamin Ei	senberg	1005 W. State Rd. 84 #120 Fort Lauderdale, FL 33315	✓ Add ☐ Remove
<u></u>	<del></del>			Add Remove
		<del> </del>		Add Remove
	****			Add Remove
<u> </u>	<u></u>	<u></u>		Add Remove
				Add Remove
D. If amend	ling any other info	ormation, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	
				<del>-</del>
Dated M	arch 09		0104	<del>-</del>
Dated 7110		What and	er or authorized representative of a member	
		-	Michael Cassell	<del></del>
		Туре	ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00