

L21000400128

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(Requestor's Name)

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(City/State/Zip/Phone #)

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MAIL

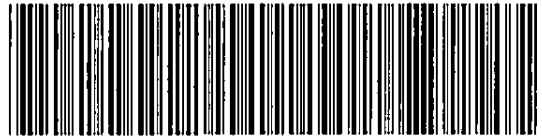
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(Business Entity Name)

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(Document Number)

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2023 MAY 9 PM 2:22

S. ROBERTS

MAY - 9 2023



March 14, 2023

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

Re: Checked Out Marine LLC  
Florida Document No.: L21000400128

Dear Sir/Madam,

Regarding the above matter, please find enclosed the original and copies of Articles of Amendment to Articles of Organization of Checked Out Marine LLC for processing and filing. Also enclosed is a check in the amount of \$25.00 to cover the fees associated with this request. Pursuant to the Cover Letter included herein, kindly return proof of filing to me in the enclosed, self-addressed envelope.

If you have any questions or concerns, or require additional information, please contact me directly at (614) 232-8682. You may also contact my paralegal, Jennifer Good, directly at (614) 232-8685. Thank you for your assistance.

Sincerely,

Scott N. Schaeffer, Esq.

SNS/jlg  
Enclosure

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ATTORNEYS AT LAW

Harold R. Kemp (1950-2011) • Michael N. Schaeffer (Retired) • Steven D. Rowe  
Erica Ann Probst • Scott N. Schaeffer • Julia L. Leveridge • Michael P. Ferguson • Daniel A. Yarmesch  
Matthew H. Coon • Andrea L. Salvino

KEMP, SCHAEFFER & ROWE  
PHONE: 614.224.2678



88 WEST MOUND STREET  
COLUMBUS, OHIO 43215

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Checked Out Marine, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Scott N. Schaeffer

\_\_\_\_\_  
Name of Person

Kemp, Schaeffer & Rowe Co., L.P.A.

\_\_\_\_\_  
Firm/Company

88 West Mound Street

\_\_\_\_\_  
Address

Columbus, OH 43215

\_\_\_\_\_  
City/State and Zip Code

scott@ksrlegal.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott N. Schaeffer

614 232-8682  
\_\_\_\_\_  
at ( )  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Checked Out Marine 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 09/09/2021 and assigned  
Florida document number L21000400128.

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)**

130 Sea Garden Street

Rosemary Beach, FL 32461

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

1201 Belle Meade Blvd.

Nashville, TN 37205

**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.*

If Changing Registered Agent, Signature of New Registered Agent


[illegible]

[illegible]

(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)

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 March 14, 2023

 Authorized Representative  
Signature of a member or authorized representative of a member

Scott N. Schaeffer, Authorized Representative  
Typed or printed name of signee