

L02000030152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

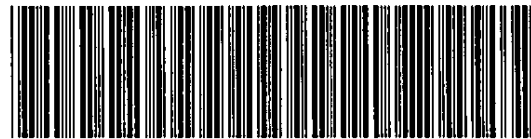
(Document Number)

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2018 APR 12 PM 1:36

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

APR 13 2018  
J. HARRIS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** PORT-O-CALL MARINA, LIMITED LIABILITY COMPANY  
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:

NOEL C. JORDAN

Name of Person

Firm/Company

4801 BONITA BAY BLVD., UNIT 1704

Address

BONITA SPRINGS, FL 34134

City/State and Zip Code

noel@naplesmarinegroup.com

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

For further information concerning this matter, please call:

Noel C. Jordan

Name of Person

at (239)

Area Code

404-7630

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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 2, 2018

NOEL C JORDAN  
4801 BONITA BAY BLVD, UNIT 1704  
BONITA SPRINGS, FL 34134

SUBJECT: PORT-O-CALL MARINA, LIMITED LIABILITY COMPANY  
Ref. Number: L02000030152

We have received your document for PORT-O-CALL MARINA, LIMITED LIABILITY COMPANY 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 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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 518A00006548

RECEIVED

2018 APR 12 AM 11:04

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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2018 APR 12 PM 1:36  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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

PORT-O-CALL MARINA, LIMITED LIABILITY COMPANY

(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 November 12, 2002 and assigned  
Florida document number L02000030152.

This amendment is submitted to amend the following:

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

CHRISTOPHER'S MARINA, 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:**

**(Principal office address MUST BE A STREET ADDRESS)**

4801 Bonita Bay Blvd., Unit 1704

Bonita Springs, FL 34134

**Enter new mailing address, if applicable:**

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

4801 Bonita Bay Blvd., Unit 1704

Bonita Springs, FL 34134

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CLERK OF CIRCUIT COURT  
PALM BEACH COUNTY, FLORIDA

**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:

Noel C. Jordan

New Registered Office Address:

4801 Bonita Bay Blvd., Unit 1704

Enter Florida street address

Bonita Springs

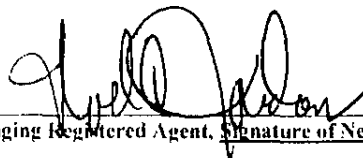
City

Florida 34134

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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 APR 12 PM 1:34  
 TAMPA  
 FLORIDA

[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 29, 2018

[Signature]  
Signature of a member or authorized representative

Typed or printed name of signee