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COVER LETTER

TO:

Registration Section Division of Corporations

CUDICOT	easing LLC		6
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Paul H. McGrail		
		Name of Person	
		Firm/Company	
	1200 Fourth Street, Box 2		
	Key West, FL 33040	Address	
		City/State and Zip Code	
		to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
Name c	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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)
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C	on rations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



T2 Arnie Leasing LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Trinida fininced finantity Company

The Articles of Organization for this Limited Liability C		7, 2003 and assigned
Florida document number L03000021982	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
T2 Marine Leasing LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address and the new registered agent and the new registered agent and the new registered office address and the new registered agent and	stered office address on ou	or records, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	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>	Name	Address	Type of Action
			□ Remove
	<u></u>		
			Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change
			□ Remove
			Change

_D Add

_□ Remove

_ Change

D. If amending any other information, enter change(s) here: v.titach additional sheets at his existing

			-
<u>.</u> .		•	
	. ,	·	
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• •			

E. Effective date, if other than the date of filing:

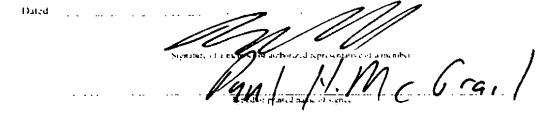
(i) in a citedise date, if other than the date must be specific and cannot be prior to date of fining crowner, than 50 days after filing.) Pursuant to 65 (207) 5000

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted as the

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.

document's effective date on the Department of State's records



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Filling Fee: \$25.00