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L04- 43098
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KEY WEST HARBOR CRUISES, 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:

MARTHA K. CHAPMAN
(Name of Person)

KEY WEST HARBOR CRUISES, LLC
(Firm/Company)

1424 WASHINGTON STREET
(Address)

KEY WEST, FLORIDA 33040
(City/State and Zip Code)

For further information concerning this matter, please call:

MARTHA K. CHAPMAN at (305) 295-3329
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for 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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SECRET
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

01 JUN 21 AM 11:01

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

KEY WEST HARBOR CRUISES, LLC

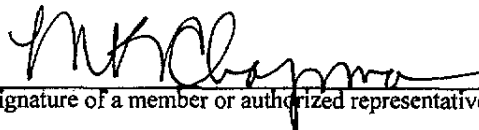
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on JUNE 8, 2004 and assigned document number L04000043098.

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

1. CHANGE MANAGING MEMBER FROM: MARTHA K. CHAPMAN
TO: TAD T. LYON
2. ADD MEMBER: MARTHA K. CHAPMAN
3. CHANGE PRINCIPAL OFFICE ADDRESS TO: 1424 WASHINGTON STREET
KEY WEST, FLORIDA 33040
4. CHANGE MAILING ADDRESS TO: 1424 WASHINGTON STREET
KEY WEST, FLORIDA 33040
5. CHANGE REGISTER'S AGENT INFORMATION TO: MARTHA K. CHAPMAN
1424 WASHINGTON STREET
KEY WEST, FLORIDA 33040

Dated JULY 16, 2004


Signature of a member or authorized representative of a member

MARTHA K. CHAPMAN

Typed or printed name of signee

Filing Fee: \$25.00

OFFICE OF STATE
CLERK
FLORIDA

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