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PICK-UP	☐ WAIT	MAIL MAIL
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SECRETARY OF STATES
ALL AND SEEP OF DRIDA

D. SCOTT NOV 2 9 2016

COVER LETTER

	sistration Sec ision of Corp			
SUBJECT.	B.W. 2004,	LLC.		
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		GINGER HOLLIDAY		
			Name of Person	
		PRO-LINE MARINE GRO	DUP, LLC	
			Firm/Company	
		20 SE 3RD ST		
			Address	
		BOCA RATON, FL 33432		
			City/State and Zip Code	
		richard@onboardstyle.com		- v
			o be used for future annual report notific	ation)
For further in	nformation co	ncerning this matter, please ca	ill:	16 17 S.
GINGER H	OLLIDAY		786 218-1773	CR & T
	Name of	Person		Celephone Number VSSET O
				elephone Number SSEE
Enclosed is a	check for the	e following amount:		PEG P
□ \$25.00 F	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division P.O. Box	NG ADDRESS: tion Section to f Corporations x 6327 see, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B.W. 2004, LLC.		
(Name of the Lim	ited 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 11/18/2004	and assigned
Florida document number L04000083549	·	
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here:	
PRO-LINE MARINE GROUP, LLC		
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 appli	igables	
<u>Principal office address MUST BE A STRE</u>	ET ADDRESS)	
		•
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICI	E BOX)	
		16 SEC
B. If amending the registered agent and	d/or registered office address on our records, <u>e</u>	
registered agent and/or the new registered		28 C
		pig M
Nome of New Besistered Agents	GINGER HOLLIDAY	
Name of New Registered Agent:		
New Registered Office Address:		5A 5
	Enter Florida street address	
	. Florid	a
	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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGMR	WORTLEY, BARBARA	20 SE 3RD ST.	Add
		BOCA RATON, FL 33432	■ Remove
			□ Change
MGMR	HOLLIDAY, GINGER	20 SE 3RD ST.	= Add
		BOCA RATON, FL 33432	□ Remove
			☐ Change
	· .		
			Remove
			Change
			Remote NOV 28 PM ALLAND SSAdd
			Difference 49
			□ Change
			□ Remove
			Change

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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-	- S. S.
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lf an efl Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
Dated	NOVEMBER 23 2016 Total
	Signature of a member or authorized representative of a member
	U

Page 3 of 3

Filing Fee: \$25.00