

LO5000037241

Richard D. Danley
Accountant



2013 Live Oak Blvd., Ste. A
St. Cloud, Florida 34771

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

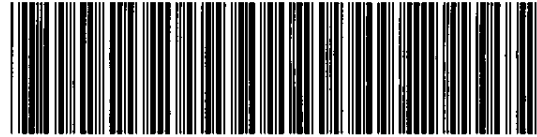
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

LO55 671

Office Use Only

No \$
LO5-37241
WGA-3317



900138122519

900138122519
02/03/09--01021--001 **25.00

FILED
09 FEB -3 AM 8:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

M. THOMAS
FEB - 4 2009
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 22, 2009

RICHARD D. DANLEY
2013 LIVE OAK BLVD. STE A
ST. CLOUD, FL 34771

SUBJECT: BOONE TIMBERWRIGHTS, LLC
Ref. Number: L05000037241

We have received your document for BOONE TIMBERWRIGHTS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 309A00002308

FILED
09 FEB - 3 AM 8:10
TALLAHASSEE
SECRETARY OF STATE
FLORIDA

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

BOONE TIMBERWRIGHTS, 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 04/15/2005 and assigned
Florida document number L05000037241.

This amendment is submitted to amend the following:

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

NORTH SHORE MARINE CONSTRUCTION, LLC

The new name must be distinguishable and end with 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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)

_____, 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

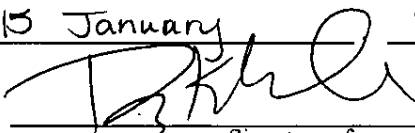
MGRM = Managing Member

<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"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

FILED
09 FEB -3 AM 9:40
SECRETARY OF STATE
TREASURY FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated 15 January 2009



Signature of a member or authorized representative of a member

BRYAN MELICK

Typed or printed name of signee