## L0500006694

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(Requestor's Name)				
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(Au	luress)			
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

## **COVER LETTER**

TO: Registration Section . Division of Corporations						
SUBJECT: INCOMING TIDE, 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:						
RAY SHANE						
(Name of Person)						
INCOMING TIDE, LLC, C/O Majestic Travel (Firm/Company)						
3043 GULF BREEZE PKWY (Address)						
GULF BREEZE, FLORIDA 32563-3245 (City/State and Zip Code)						
(City/Made and Zij) Code)						
For further information concerning this matter, please call:						
RAY SHANE at (850 ) 324-0071 (Name of Person) (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee & Certificate of Status  Certificate of Status & Certificate of						

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATIONS

INCOMING TIDE, LLC

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

(A	i fortua Emmed Elabrity Company)	ONS
The Articles of Organization for this Limited Lic	ability Company were filed on JULY 6, 2005	
Florida document number <u>L05000066694</u>	<u> </u>	
This amendment is submitted to amend the follo	wing:	
A. If amending name, <u>enter the new name of</u>	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the design	gnation "LLC" or the abbreviation
B. If amending the registered agent and/o registered agent and/or the new registered off		, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	(F Fl )	
	(Enter Florida	sireei auaress)
	, FI	orida(Zip Code)
	1=:2/	10.35 = 2.05

## 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)

(i 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>	Address	Type of Action
MGRM	LAUREL DICK	ONE PORTOFINO DRIVE SUITE 1501 PENSACOLA BEACH, FL 32561	Add Kemove
MGRM	RAY SHANE	3043 GULF BREEZE PKWY Guif Breeze, FL 32563-3245	Add Kemove
MGR	C. EVAN CROSBY	721 Pensacola Beach Blvd. Unit 801 Pensacola Beach, FL 32561-6814	Add Remove
			☐ Add ☐ Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter cl	hange(s) here: (Attach additional sheets, if necessary.)	
<u>c</u>	hange Principal Address and M	lailing Address	-
F	rom: One Portofino Drive, Suite	e 1501, Pensacola Beach, 32561	_
To:3043 Gulf Breeze Parkway,C/O Majestic Travel,Gulf Breeze, FL 32563-3245			SECRE /ISION
			FILE OF CO 24
Dated Jan	Ray Shin	mber or authorized representative of a member	LED STATE CORPORATIONS
	Ray Shane	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00