LD Le000094654

(Req	uestor's Name)	
(Add	ress)	
(Add	lress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number)	
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EFFECTIVE DATE 01/01/2012



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FILED

11 DEC 20 M 4: 06

NORTANY OF STATE

STORESSEE, FLORID

D. BRUCE
JAN 0 6 2019.

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 21, 2011

MIKULAS CSITARI 812 BAYSIDE DRIVE CAPE CANAVERAL, FL 32920

SUBJECT: MARINE TECHNOLOGIES GROUP, LLC

Ref. Number: L06000094654

We have received your document for MARINE TECHNOLOGIES GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Department of State does not maintain the names and addresses of the members of a limited liability company. Please remove the names and addresses of the members from the document OR insert the letters "MGRM" beside their names and addresses to indicate they are serving in the capacity of a managing member.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 811A00028430

TILED

11 DEC 20 PM 4: 06

COVER LETTER	
TO: Registration Section Division of Corporations	•
SUBJECT: Marine Technologies Group 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:	
Mikulas Csitari	,
Maire Technologies Group UC	
812 Bayside DR	
Cape Canaveral 1 32920	
Auckflushatler annual report notification) *	
For further information concerning this matter, please call:	
Mikulas (SitaRi at 321298.881) Name of Person Name of Person	s.
Enclosed is a check for the following amount:	
\$25.00 Filing Fcc S30.00 Filing Fcc & S55.00 Filing Fcc & S60.00 Filing Fcc, Certificate of Status Certified Copy Certificate of Status &	
(additional copy is enclosed) Certified Copy (additional copy is enclosed)	. 25
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building Tallshasses, FL 32314 2661 Executive Center Circle	
Tallahassee, FL 32301	
State of Florida Division of Corpora	dions
<u>من خياخ</u>	
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FLORIDA RIPA PA	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marine Techno (Name of the Limited Liability Comps (A Florida Limited	any as is the group of a significant of the Liability Company)						
The Articles of Organization for this Limited Liability Company were filed on							
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited liab	pility company here:						
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation						
Enter new principal offices address, if applicable:							
(Principal office address MUST BE A STREET ADDRESS)	HAT CO						
	% 7 0 1						
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BOX)							
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	<u> </u>						
Name of New Registered Agent: MGRM WiKu	las Csitari						
New Registered Office Address:	BAYSIDE Dr						
 -	Enter Florida street address						
CAPE	CAHAVERAL , Florida 32920						
	City Zip Code						
New Registered Agent's Signature, if changing Registered Agent:							
Thereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	lete performance of my duties, and I am familiar with and provided for in Chapter 608, F.S. Or, if this document is						

Page 1 of 2

etrective DATE 01/01/2012

MGRM

MGR = Mar			
MGRM = M	lanaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Romi Csitari	B12 Bayside & Cape Canaveral For	Add Remove
<u>M.GR</u> M	Mikulas Csitari	Capi Canaveral Et	Add Remove
<u> </u>	* or management was a second or seco		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter change NO Change Office	e(s) here: (Attach additional sheets, if necessary.) Let Ve 112012	

Typed or printed name of signee
Page 2 of 2

Signature of a member or authorized representative of a member

Filing Fee: \$25.00