L0700000 9545

(Requ	estor's Name)		
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EXAMINER



700212083207

09/16/11--01016--030 **25.00

DIVISION OF CORPORATIONS

11 SEP 16 AN 84 30

Attn: Florida Department of State Division of Corporations

Please send the acknowledgement to the following address:

TI SEP 16 M & 30

2890 NE 187th Street

Aventura, FL 33180

Attn: Maria Fundora-Macias

Daytime Phone #: 305-374-2782 x205

Fax: 305-374-5438

COVER LETTER

SUBJECT:	Vertical Yacht 0	Club Thunder Alley,LLC	**************************************
SUBJECT.		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.	7 %
Please return all corresp	condence concerning this matter	r to the following:	ď
		Name of Person	
		Firm/Company	
		Address	
		City/State and Zip Code	_ _
	E-mail address: (to be used for future annual report notifica	ation)
For further information	concerning this matter, please of	all:	
Name	of Person	at ()	Felephone 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)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

1 Sto 16 M & 30

VERTICAL YACHT CLUB THUNDER ALLEYY 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 or	on1/25/2007	and assigned	
Florida document number <u>L07000009545</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability compa	ny here:		
The new name must be distinguishable and end with the words "Limited Liability "L.L.C."	Company," the designation	LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
/haireinglosses address MUCT BE A CEREET 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 registered agent and/or the new registered office address here:	s on our records, <u>enter</u>	the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
City		7in Codo	

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 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> **Type of Action** MGR Sturner Andrew ☐ Add √ Remove Hi Lift Partners LLLP MGR 2890 NE 187th St ✓ Add Aventura,FL 33180 Remove ☐ Add ☐ Remove Remove ∐Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member of General Partner. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00