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SECRETARY OF STATE TALLAHASSEE, FLORIDI

COVER LETTER

TO:

Registration Section Division of Corporations

MAILING ADDRESS:Registration Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

| SUBJECT: Car | se Regal Yaeht Cewter, LLC | |
|-------------------------------|--|-----|
| , | (Name of Limited Liability Company) | |
| | | |
| The enclosed Articles of | Amendment and fee(s) are submitted for filing. | |
| Please return all correspo | ondence concerning this matter to the following: | |
| | Patricia Baldo | |
| | (Name of Person) | |
| - | Cape Regal Yacht Center | |
| • | - 10 1 N/ A | |
| - | 924 Del Prado BLVd (Address) | |
| ٠. | Cape Coral, FL 33990 (City/State and Zip Code) | |
| For further information co | oncerning this matter, please call: | |
| PATRICIA | Baldo at (239) 574 - 7342 AR B | |
| Enclosed is a check for the f | SEE TOF TO SEE THE SEE | i i |
| \$25.00 Filing Fee | S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee; Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed) | į |
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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

Cape Regal Yacht Center LLC
(Present Name)
(A Florida Limited Liability Company)

| | · | | |
|---------|---|---------------------|-----------------------|
| FIRST: | The Articles of Organization were filed on February 19 2007 and assigne document number | d | |
| SECOND: | This amendment is submitted to amend the following: | 1 | |
| | <u>Menove</u> :) Manager / Menber | | |
| | Title MGRM | | |
| | Leoward Johathan P | 7 | |
| | 1406 SE 10th St | SECRETARION PARTIES | serence is |
| | Cape Coral FC 33990 | HASS HASS | Parents Production |
| | | | i i |
| (| Add Manager Meyber | 801 812 11.5 | i.,_,, |
| | Title MGRM | | , |
| | PATRICIA Baldo | | |
| | 924 DelPrado BLVd | | |
| , | CAPE CORAL, FL 33990 | | |
| Dated | tugust 6, 2007. | | |
| | Report o Salver | | |
| | Signature of a member or authorized representative of a member | | |
| | Robert O. Salver | | |
| | Typed or printed name of signee | | |

Filing Fee: \$25.00