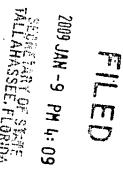
L07000058354

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
A. LUNT				
JAN 1 2 2008				
EXAMINER				



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Office Use Only

COVER LETTER

TO: Registration Son Division of Con					
SUBJECT: Nautiko	os Florida Services,				8
	(Name of Lim	ited Liability Company)			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Dana Clore				
		(Name of Person)			
	Nautikos Florida, LLC				
		(Firm/Company)			
	2550 S. Bayshore Drive	Suite #4			
	(Address)			2009	
	Coconut Grove, FL 3310	33		WEWEN	~]
		(City/State and Zip Code)		6-1	-
For further information of	concerning this matter, please c	all:	<u> </u>	PH F	
Dana Clore		at (305) 856-4050		99	•
(Name	of Person)	(Area Code & Daytime T	elephone Number)	, W	
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$\sigma \frac{1}{3}\frac{60.00}{60.00}\$ Filing Fee. Certificate of Statu Certified Copy (additional copy is		Status &	sed)

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

Nautikos Florida Services, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Company	were filed on 6/1/2007	and assigned
Florida document number <u>L07000058354</u> .		
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 "Limi	ited Liability Company," the designat	ion "PCC" or B abbreviation
"L.L.C."		JAN T
Enter new principal offices address, if applicable:	2550 S. Bayshore Drive	
(Principal office address MUST BE A STREET ADDRESS)	Suite #4	% ५
· · · · · · · · · · · · · · · · · · ·	Coconut Grove, FL 33133	
		Sign fi
Enter new mailing address, if applicable:		TATE ORNDA
(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		iter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida stre	et address)
·	, Florid	
	(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 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 MGRM . John D'Agostino 825 NE 3 Street **≖** Add Remove Dania Beach, FL 33004 ☐ Add 🗂 Remove _ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated December 20 Signature of a member or authorized representative of a member Leonardo Carbajales

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00