

#L07000066727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

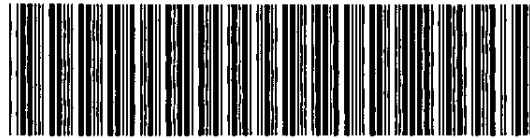
(Business Entity Name)

(Document Number)

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FILED
13 MAR 20 PM 4:13
TALLAHASSEE
FLORIDA

K. SALY
EXAMINER
MAR 21 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **NEMO'S BOUNTY 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:

Marsha Daniels

Name of Person

NEMO'S BOUNTY LLC

Firm/Company

1510 River Dr SW

Address

Ruskin, FL 33570

City/State and Zip Code

manateefish@verizon.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marsha Daniels

Name of Person

at **813 649-1275**

Area Code & Daytime Telephone 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:
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**

NEMO'S BOUNTY LLC

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

FILED
13 MAR 20 PM 4:13
NOTICE OF FILING

The Articles of Organization for this Limited Liability Company were filed on 06/25/2007 and assigned Florida document number L07000066727.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1510 River Dr SW

(Principal office address MUST BE A STREET ADDRESS)

Ruskin, FL 33570

Enter new mailing address, if applicable:

1510 River Dr SW

(Mailing address MAY BE A POST OFFICE BOX)

Ruskin, FL 33570

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Marsha Daniels

New Registered Office Address:

1510 River Dr SW

Enter Florida street address

Ruskin

City

Florida 33570

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.

Marsha Daniels
If Changing Registered Agent, Signature of New Registered Agent

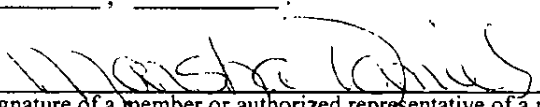
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	LITTLE MANATEE GROUP LLC	111 S ARMENIA AVE	<input type="checkbox"/> Add
		SUITE 101	<input checked="" type="checkbox"/> Remove
		TAMPA, FL 33609	
MGRM	LITTLE MANATEE GROUP LLC	1510 River Dr SW	<input checked="" type="checkbox"/> Add
		Ruskin, FL 33570	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated **February 28**, **2013**



Signature of a member or authorized representative of a member

Marsha Daniels

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00