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SECRETARY OF STATE
TALLAHASSEE, FL

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Mal 7/8/25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Carden's Great Adventures

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:

Mark B Nelson

Name of Person

Firm/Company

4804 Bay Crest Dr.

Address

Tampa, FL 33615

City/State and Zip Code

Mbnswapilot@gmail.com

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

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TALLAHASSEE, FL

For further information concerning this matter, please call:

Mark B Nelson

813 541-5679
at ()

Name of Person

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 Address

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CARDEN'S GREAT ADVENTURES

(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 on 10/08/2007 and assigned
Florida document number L07000102088.

This amendment is submitted to amend the following:

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

SV Naxos, LLC

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

Enter new principal offices address, if applicable:

4804 Bay Crest Dr. Tampa, FL 33615

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

4804 Bay Crest Dr. Tampa, FL 33615

(Mailing address MAY BE A POST OFFICE BOX)

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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:

New Registered Office Address:

Enter Florida street address

Florida

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 605, 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Carden, Robert E. Jr.	525 Pope Ave NW	☐ Add
		Winter Haven, FL 33881	☒ Remove
			☐ Change
MGR	Nelson, Mark B	4804 Bay Crest Dr	☐ Add
		Tampa, FL 33615	☐ Remove
			☒ Change
AMBR	Buljat, Bryan	4711 W Bay View Ave	☒ Add
		Tampa, FL 33611	☐ Remove
			☐ Change
AMBR	Morgret, Nicholas K	1114 Coatal Cir	☒ Add
		Ocoee, FL 34761	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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TALLAHASSEE, FL

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TALLAHASSEE, FL

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 06 May, 2025


Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00