L07000114296

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. (Cit	y/State/Zip/Phone	#)
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2017 MAY -5 PH 3: 48

K. SALY MAY - 9 2017

COVER LETTER

Division of Corporations
SUBJECT: MANINE VENTURES GADUP LLC
SUBJECT: MANINE VENTURES GARVE 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:
Name of Person
Name of Person
ANCLOTE HARBONS SERVICE CO. Firm/Company
527 ANCLOTE NO Address
TARPON SPRINGS FL 34689
TARPON SPNINGS FL 348F9 City/State and Zip Code NWHAASED AOL. COM E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
AICHARD HAASE at (237) 410-7234 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$\text{Certified Copy} & Certificate of Status & Certified Copy (additional copy is enclosed) \$\Bigcup \$\text{Certified Copy} & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO: Registration Section

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

RI.

ARTICLES OF ORG	GANIZATION '// 🛌
OF	2017 MAY - ED
MARINE VENTURES 6 (Name of the Limited Liability Company as (A Florida Limited Liabil	ity Company)
The Articles of Organization for this Limited Liability Company wer	re filed on
Florida document number 2 07000114296	•
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 contain the words "Limited Liability C	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET 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 registered agent and/or the new registered office address here:	address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

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 = M $AMBR = A$	Iaņager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	RICHARD HAASE AS	SAS ANCLOTE NO	Z Add
	RICHARD W. HAASE	SAJ ANCLOTE NO TARPON SPRINGS FL 34689	□ Remove
	LIVINOU TRUST	FL 34689	Change
			Add
	/		Remove
	·		Change
			SECHE PRY OCHARGE
			PROChamps 18
			□ Remove
			Change
			🗖 Add
			☐ Remove
			☐ Change
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			Change

ımend	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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n effect	e date, if other than the date of filing:
	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at a seffective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the record is filed.
ted	5/2, 2017. R. Hanse
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00