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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Aquamarine 302, 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:	
Joseph Sloboda	
(Name of Person)	
Aquamarine302, LLC (Firm/Company)	
3940 E. Coquina Way (Address)	
Weston, FL 33332 (City/State and Zip Code)	
For further information concerning this matter, please call:	2006 SEI TALI
Joseph Sloboda at (954) 557-4653 (Name of Person) (Area Code & Daytime Telephone Number)	APR ILL
Certificate of Status Certified Copy Certificat (additional copy is enclosed)	SECRETARY OF STATE of Steers of Steers of Steers of Steers of Steers of Copy and 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

Aquamarine302, LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
((00.00,000 =,,,,,,,,,	
The Articles of Organization for this Limited Liability Company were filed on 3/10/2008	and assigned
Florida document number <u>L08000025226</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
	√ 8 ?
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LI".L.C."	APR APR
B. If amending the registered agent and/or registered office address on our records, enter the	ie name of the new_
registered agent and/or the new registered office address here:	E OF A
	AHII: OF STA
	쓰러
Name of New Registered Agent:	0m vo
V D 1 100 100 111	
New Registered Office Address: (Enter Florida street add.)	ress)
, 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 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 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 = Ma	anaging Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>MGRM</u>	James Dishinger	3940 E. Coquina Way Weston, FL 33332	
MGRM_	Marisol Cohen	11822 Shire Wycliffe Ct Tampa, FL 33626	Add Remove
	 		Add Remove
			Add Add Remove
			APP
			OF S Remove
D. If amendi	ng any other information, ente	er change(s) here: (Attach additional sheets, if necessar	v.)
Dated April 8	3	, 2008	
	Signature of a	a member or authorized representative of a member	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00