## L08000626196

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SECRETARY OF STATE OIVISION OF CORFORATION

FEB 2 4 2012 T. HAMPTON

## **COVER LETTER**

TO: Registration Sec Division of Corp		Ø.	·
SUBJECT: LEAN	IE IT TO B (Name of Limi THE CRUISE	EUERLY, LLC ited Liability Company) BOATQUE, a/b/a	d/b/a Journeys 10 Beyond THE Best
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	LEAUE IT - 424 REI	(Name of Person)  TO BEVERLY, L (Firm/Company)  SAIL WAY (Address)  ITE BEACH, (City/State and Zip Code)	LC FL 32937
For further information co	ncerning this matter, please ca	all:	
1	HARRIS Person)	at (321) 773 ·	- 5   0   ne 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	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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

12 FEB 23 PM 12: 23

LEAV ( <u>Name of the Limited Liabilit</u> (A Florida	E IT TO BEVERLY, LLO y Company as it now appear Limited Liability Company)		<del></del>
The Articles of Organization for this Limited Liability C Florida document number <u>L08000026496</u>	Company were filed on 03/1	13/2008	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim		_	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Compar	ny," the designation "LLC	or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		our records, enter the	name of the new
Name of New Registered Agent:			<del> </del>
New Registered Office Address:	(En	nter Florida street addre	ss)
	,		-
-	(City)	, Florida	(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)

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	MICHELLE MILLER	2107 STONE CROSS CIRCLE ORLANDO FL 32828	Add Remove
MGRM	JOHN K MILLER	2107 STONE CROSS CIRCLE ORLANDO FL 32828	Add B Remove
MGRM	WILLIAM K HARRIS	424 RED SAIL WAY SATELLITE BEACH FL 32937	Add Remove
			Add Remove
	** MONEY ***		
D. If amend	ling any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)	
			SECRE DIVISION I
	122/2012	·	FILED STATE OF CORPORATION 23 PM 12: 23
	BEVERLY S. HARRIS, MEMBI	nber or authorized representative of a member	

Typed or printed name of signee

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Filing Fee: \$25.00