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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

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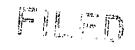
COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sea Tow of Key Largo LLC (Name of Limited Mability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Steven C. Powers (Name of Person)
Sea Tow of Key Largo
8904 Adrienne Ct.
Louisville KY 40245 (City/State and Zip Code)
(Colymans and Cap of Ca
For further information concerning this matter, please call:
Steven C. Powers (Name of Person) (Area Code & Daytime Telephone Number)
(Traile of Policity)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$25.00 Filin

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



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ARTICLES OF O	NGANIZATION	HIII - DA
OF	7	SECRETARY OF STATE
		TALLAHASSEE FLORIDA
SEA TOW OF K	ey Largo	11 C
(Name of the Limited Liability Compan	v as it now appears on our i	records.)
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	ability Company)	
	رايوا	200
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number L08000057252	•	
This amendment is submitted to amend the following:		
This afficialities submitted to afficial the following.		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Powers Marine Serv	ice LLC	
The new name must be distinguishable and end with the words "Limit	ed Liability Company," the d	esignation "LLC" or the abbreviation
"L.L.C."		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
(Frincipal Office address MOST 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 off	ioo addraes on our raco	rds anter the name of the new
registered agent and/or the new registered office address here		us, enter the name of the new
TORREST VO SERVED SHAWN OF SHAW HOW I DESIGNATION OF THE BUILD HOLD	•	
Name of New Registered Agent:		

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

(City)

(Enter Florida street address)

Florida _

(Zip Code)

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 = Ma MGRM = N	nager ⁄Ianaging Member		
<u> Fitle</u>	Name	Address	Type of Action
<u> </u>			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	ary.)
			OB JUL 22 AN
Dated	7/18 20	008	ANII: 08
	Signature of a member	r or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00