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SECRETARY OF STATE

J. BRYAN

JUN - 2 2009

EXAMINER

COVER LETTER

TO: Registration S Division of Co			•	
Sebole:		wind Yacht LLC ited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are su			
Please return all corresp	oondence concerning this matter	r to the following:		
		Dwight C. Hewett		. •
		Name of Person		SEI SEI
		Firm/Company		AREA A
	55	5 Crandon Blvd, Apt. 24		RY OF S
	V.	Address		PH 1: 49 EE, FLORIG
		ey Biscayne, FL. 33149 City/State and Zip Code		OF 9
	E-mail address: (ett@doranjasongroup.com to be used for future annual report notifi	cation)	
For further information	concerning this matter, please of	call:		
	right C. Hewett	at (305) Area Code & Daytime	-592-7606 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)) Certified	e of Status &
MAILING ADDRESS:		STREET/COURI	FR ADDRESS:	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Summ	nerwind Yacht LLC			
(<u>Name of the Limited Liabili</u> (A Florida	i Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	April 6th, 2009 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :		
The new name must be distinguishable and end with the we"L.L.C."	ords "Limited Liability Comp	,		
Enter new principal offices address, if applicable:		SEC TALL		
(Principal office address MUST BE A STREET ADD	RESS)	AFE TO THE PERSON OF THE PERSO		
Enter new mailing address, if applicable:		RY OF STOREST		
(Mailing address MAY BE A POST OFFICE BOX)		87. 6		
B. If amending the registered agent and/or registered agent and/or the new registered office ad Name of New Registered Agent: New Registered Office Address:		our records, enter the name of the new		
inew 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 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 = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	Naysbeli Hewett	555 Crandon Blvd, Apt. 24 Key Biscayne, FL. 33149	Add Remove
MGR	Allison Calamusa	275 Harbor Drive Key Biscayne, FL. 33149	Add Remove
			Add Remove
D. If amendin	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
_		ALLAMASS	F II
Dated	May 27th , 200	P OF STATE PLORIDA	- ED - ED - C
-	Dw	r authorized representative of a member ight C. Hewett r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00