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EXAMINER

COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

Captain Sonny's Dive Charter, 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: Edward G Prentice Name of Person :. Captain Sonny's Dive Charter, LLC Firm/Company PO Box 372303 Address Key Largo, FL 33037 City/State and Zip Code CSDC@EGP.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Edward G Prentice 304.5807 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$30.00 Filing Fee & - \$55.00 Filing Fee & ✓ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section . **Division of Corporations** Division of Corporations P.O. Box 6327 at Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Captain Sonny's Dive Charter, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 26 June 2009 and assigned L09000062078 Florida document number 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 end with the words "Limited Liability Company," 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: Eñter Florida street address.

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

Thereby 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

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 = Manager

| | = Managing Member | Address | 770 A.A.A. |
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Filing Fee: \$25.00