L09000078091

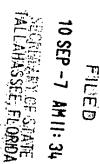
ì
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
P!CK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400184944154

09/07/10--01019--010 **25.00



S. HAWKES

SEP 0 8 2010

EXAMINER

COVER LETTER

On The Watersports, LLC			
•	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
		Mike Stockwell	
		Name of Person	
	Or	The Watersports, LLC Firm/Company	
		09 Boardwalk Place E	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		adeira Beach, FL 33708 City/State and Zip Code	
	mil.aa.6	•	
	E-mail address:	Dshoemakercompanies.cor (to be used for future annual report noti	fication)
For further information	n concerning this matter, please	call:	
	like Stockwell	at (715)	340-3704
Name	e of Person	Area Code & Daytin	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 enclose	\$60.00 Filing Fee, 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

On II	ne vvatersports, LLC	,
. (Name of the Limited Liab) (A Flori	lity Company as it now apped a Limited Liability Company)	ars on our records,)
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on	August 13, 2009 and assigned
This amendment is submitted to amend the following	:	• · · · · · · · · · · · · · · · · · · ·
A. If amending name, enter the new name of the l	imited liability company ho	ere:
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	pany," the designation "HE" or the abpreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AI)	<u>DRESS)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	E	nter 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action Title Name** Address MGRM Terry Ryan 209 Boardwalk Place E ✓ Add Madeira Beach, Fl. 33708 Remove Remove _∏ Add ☐ Remove $\prod Add$ ☐Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September, 2 2010 Dated_ Signature of a member or authorized representative of a member Michael Stockwell Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00