# Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000208398 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page: Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

.From:

Account Name : LEGALZOOM.COM INC.

Account Number + 120010000062.

Phone : (323)962-8600

Fax Number

: (323)962-3889

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

# MARINE WHOLESALE NETWORK LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

T. CLINE

SEP 29 2009

Electronic Filing Menu

Corporate Filing Menu

#### **FAX COVER SHEET**

то		
COMPANY		•
FAX NUMBER	18506176383	
FROM	Tony Burroughs	
DATE	2009-09-25 14:46:04 PDT	
RE	FL SOS	

#### COVER MESSAGE

Tony Burroughs | Special Filings Specialist Business Special Filing 323.962.8600 x862 | Fax 323.337.0742| tburroughs@legalzoom.comwww.legalzoom.com | 7083 Hollywood Blvd., Suite 180, Los Angeles, CA 90028

This transmission may contain confidential and privileged material for the sole use of the intended recipient(s). Any review, use,
distribution or disclosure by others is strictly prohibited. If you are not the intended recipient (or authorized to receive for the recipient), please contact the sender by reply email and delete all copies of this message. LegalZoom is not an attorney and can only provide self help services at your specific direction. LegalZoom.com, Inc. is an egistered and bonded legal document assistant, #0104, Los Angeles County (exp. 12/09). Prices, features, terms and conditions are subject to change without notice.

From: BizCopier1@legalzoom.com [BizCopier1@legalzoom.com]

Sent: Friday, September 25, 2009 4:43 PM

To: Tony Burroughs

Subject:

This document was digitally sent to you using an HP Digital Sending device.

### COVER LETTER

TO: Registration S  Division of Co					
SUBJECT: MARIN	E WHOLESALE NETWO	ORK LLC			
, <del></del>	(Name of Lim	ited Liability Company)			
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	nondence concerning this matter	to the following:			
	Tony Burroughs				
		(Name of Person)			
	Legalzoom.com, Inc				
		(Flm√Company)			
	7083 Hollywood Blvd				
	•	(Address)			
	Los Angeles, CA 90			A Service	7136
		(City/State and Zip Code)			7899 SFP
For further information	concerning this matter, please of	eall:		SSS SSS	28
Tony Burroughs		at ( 323 ) 962-8600		ing :	
(Name	e of l'erson)	(Area Code & Daytime T	elephone Number)		<del>ှာ</del>
Enclosed is a check for	the following amount:			7> (	රා
<b>[]</b> \$25.00 Filling Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Certificate of Certified Co (additional of	of Status & opy	osed)
	LING ADDRESS: stration Section	STREET/COURIER Registration Section	ADDRESS:		

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassec, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARINE WHOLESALE NETWORK LI	LC	
(Name of the Limited Linblity Cor (A Florida Limit	mpany as it now appears on our records.) led Liability Company)	
<b>V</b>		
The Articles of Organization for this Limited Liability Comp	pany were filed on 09/04/2009	and assigned
Florida document number L09000085829		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
'		
Marine Dealer Network LLC  The new name must be distinguishable and end with the words "	1 2 Jan 2 1 1 In 11 In 2 Commences 12 three descriptions (1)	1 de la constantina
The new name must be distinguishable and end with the words "	Limited Liability Company, the designation is	The continuation
•		全角 中 二
B. If amending the registered agent and/or registered	d affice and decrease on the managed antique	
registered agent and/or the new registered office address	a office address on our records, <u>enter i</u> here:	
TOTAL STATE OF THE SECOND	eminimated-sife-	
		ිසු ශූ
Name of New Registered Agent:		
Haire of the wildgistered Argent.		<del></del>
New Registered Office Address:	- the second sec	
	(Enter Florida street ad	dress)
·	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag	<u>rent:</u>	
The second se	Lumber to got in this managing I finished an	man ta complements
I hereby accept the appointment as registered agent and the provisions of all statutes relative to the proper and o		
accept the obligations of my position as registered agent	t as provided for in Chapter 608, F.S. Or,	if this document is
being filed to merely reflect a change in the registered of company has been notified in writing of this change.	ffice address, I hereby confirm that the lir	nited liability
company has been normal in mining of this change.		
<del></del>		
411	f Changing Registered Agent, Signature of New it	erstered Agenti

MGR = Manager

To: Page 5 of 5

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:

	Name	Address	Type of Action
	the contribute of the facility of the first feet of the first feet of the first feet of the feet of th		Remove
			_
			Add Remove
			Add
	THE STREET, THE THE STREET STREET, STR		Remove
			<del>_</del> ,
			Add Remove
			Add
			Remove
			型50 23
	****		THE SE
			下 3至 2
amend	ing any other information, enter chan	ge(s) heré: (Attach additional sheets, if necessary.)	EP 28 AM 8: I
·		**************************************	
			25 00 20
			₩ 000 000 000 000 000 000 000 000 000 0
			<del></del>
			<u> </u>
	1/20 200	^	<del></del>
' <del>i</del>	, 200	9 .	
	1366	er or authorized representative of a member	· <del></del>

Page 2 of 2

Filing Fee: \$25.00