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DIVISION OF CORPORATIONS

10 SEP 17 AN ID. F.

T. HAMPTON

SEP 2 0 2010

FXAMINED

COVER LETTER

TO: Registration Secti	on rations
SUBJECT: BLUE	MARLIN BOAT REPAIR, LLC Name of Limited Liability Company
The enclosed Articles of An	nendment and fee(s) are submitted for filing.
Please return all correspond	ence concerning this matter to the following:
	JANICE GALLETTI
٠, .	Blue Marlin Boar Repair, LLC Firm/Company
	4745-126 Ne WORTH UNIT 9697 Address
	St. Petersburg, Fr. 33762
	St. Peteurburg, Fr. 33762 City/State and Zip Code alex QUNofederation. ORG
For further information cond	E-mail address: (to be used for future annual report notification) cerning this matter, please call:
Alex Emman	at (727) 230 - 16 22 Area Code & Daytime Telephone Number
Enclosed is a check for the	•
▼\$25.00 Filing Fee [\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

NOTE: Please change Name From Blue MARIN BOAT RAAIR LLC, TO EVEREST 1200f Cleaning, LLC. Thanks,

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION PLUC MARLIN BOAT Reparie, 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 ______ 10 | 15 | 09 Florida document number L dq 0 000 99772 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: EVEREST ROOF CLEANING 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) Same as before 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: New Registered Office Address: Enter Florida street address City 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

N/A

If Changing Registered Agent, Signature of New Registered Agent

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 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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	N/		Add Remove
	•		Add Remove
	 		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other informati	on, enter change(s) here: (Attach additional sheets, if necessar	<u>=</u>
			SECRETARY OF STATE /ISJON OF CORPORATIO 10 SEP 17 AM IO: 54
Dated		ay a Suce.	TATE Pations
		ature of a member or authorized representative of a member alph A. Emmanuclu Typed or printed name of signee	•

Page 2 of 2

Filing Fee: \$25.00