## 110000035643

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
opeolar modulations to 1 ming officer.

Office Use Only



900198930089

03/24/11--01037--001 \*\*30.00

TI MAR 24 PHIZ: 57

STORE JARY OF STATE
PALLAHASSEE, FIORITA

D. BRUCE

MAR 25 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration Division of C	n Section Corporations	·	
SUBJECT:	B.E.T.	Г. Fishing, LLC	
<u> </u>		ited Liability Company	<del></del>
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corre	spondence concerning this matte	r to the following:	
		Gloria Roa Bodin, Esq.	
		Name of Person	
	G	iloria Roa Bodin, P.A.	
		Firm/Company	
	90	Almeria Ave Suite 200	
		Address	
	C	oral Gables, FL 33134	
		City/State and Zip Code	, T
	E-mail address: (	gglobo@aol.com to be used for future annual report notification	
For further informatio	n concerning this matter, please	call:	HASSEE, FL
	ia Roa Bodin, Esq. e of Person	at ( <u>305</u> ) <u>442</u> Area Code & Daytime Tele	-1322 of N
Enclosed is a check for	or the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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

	B.E.T.T. Fishing, LLC			
( <u>Name of the Limited</u> (A	Liability Company as it now appears Florida Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Li	04/01/2010	and assigned		
Florida document numberL10000035				
This amendment is submitted to amend the follo	owing:			
A. If amending name, <u>enter the new name of</u>	the limited liability company here	:		
	N/A			
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Compan	ny," the designation "LLC"	or the abbr	eviation
Enter new principal offices address, if applica	able: <u>N/A</u>		To .	
(Principal office address MUST BE A STREE	T ADDRESS)	ļ.		
			A A	
		ر د	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	-
Enter new mailing address, if applicable:	N/A	 د		П
(Mailing address MAY BE A POST OFFICE I	BOX)		31¥1S <b>138 23</b>	O
		IUA		
B. If amending the registered agent and/oregistered agent and/or the new registered of		ur records, <u>enter the n</u>	ame of th	ne new
Name of New Registered Agent:	N/A			
New Registered Office Address:				
	Ente	er Florida street address		
		, Florida		
	City	Zi	ip 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 Title <u>Name</u> **Address Type of Action** MGRM 1890 Grey Falcon Trace Lionel Botha ✓ Add Vero Beach, FL 32962 Remove Remove ☐ Add □ Remove ∏Add Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) \_\_\_\_\_, <u>2011</u> . Dated \_\_\_\_ March 8

Signature of a member or authorized representative of a member

Harry A. Pappas
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00