

L10000060080

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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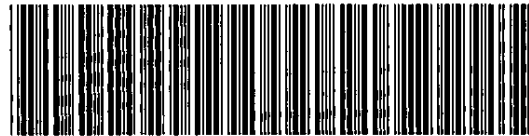
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan SEP 2 - 2010



VIA FEDEX
Tracking # 7938 6800 1940

August 31, 2010

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Offshore Boatworks, LLC
Articles of Amendment to Articles of Organization

Dear Deputy Clerk:

Accompanying this letter is the original and one copy of Articles of Amendment to the Articles of Organization for Offshore Boatworks, LLC, along with my check in the amount of \$60.00.

If possible, please email the certified copy and the certificate of status to:

patrick@caseylawoffice.com

Hard copies should be mailed to:

Patrick B. Casey, J.D., CPA
Casey Law Office, LLC
P.O. Box 2527
Bonita Springs, FL 34133

Sincerely,

For the Firm
Patrick B. Casey, J.D., CPA
Counselor and Attorney at Law

cc: file
encl.: as stated
S:\data\Clients\Liggett, Scott\Offshore Boatworks LLC\Formation\Letter(S) 20100831 Article of Amend to DOC.doc

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: OFFSHORE BOATWORKS, 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:

Patrick B. Casey, J.D., CPA

Name of Person

Casey Law Office, LLC

Firm/Company

P.O. Box 2527

Address

Bonita Springs, FL 34133

City/State and Zip Code

patrick@caseylawoffice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patrick B. Casey, J.D., CPA

Name of Person

at (239)

498-6999

Area Code & Daytime 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 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**

FILED
10 SEP -1 AM 10: 28

OFFSHORE BOATWORKS, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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 June 4, 2010 and assigned
Florida document number L10000060080.

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:

New Registered Office Address:

Enter 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

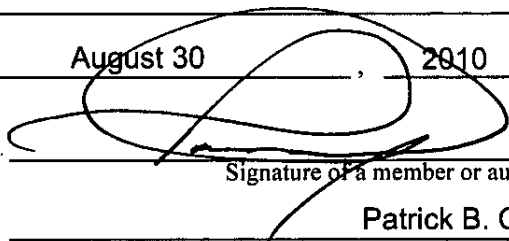
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Matthew D. Huss	610 West Las Olas Blvd. #914N Fort Lauderdale, FL 33312	☒ Add ☐ Remove
MGR	Fredrick B. Myers	610 West Las Olas Blvd. #914N Fort Lauderdale, FL 33312	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED
10 SEP - 1 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated August 30, 2010



Signature of a member or authorized representative of a member

Patrick B. Casey, J.D., CPA

Typed or printed name of signee