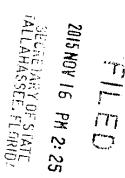
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K.SALY EXAMINER NOV 18 2015

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

Yacht Surface Restoration 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:

## Jonathan Broughton

Name of Person

## Yacht Surface Restoration

Firm/Company

1007 N. Federal Hwy. #210

Address

Fort Lauderdale, FL 33304

City/State and Zip Code

jonathan@ysronline.net

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

For further information concerning this matter, please call:

## Jonathan Broughton

<sub>../</sub>954、588-4408

Name of Person

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)

■ S60.00 Filing Fec, 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**

ТО	ı	
ARTICLES OF OF	RGANIZATION	F/1
OF		2015 NOV 16 PH 2: 25  records.) AHASSEE FLORING
		NOVIE
Yacht Surface Restoration PLC		All PH 2: 22
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our bility Company)	records.)
		FIORIK
The Articles of Organization for this Limited Liability Company w	ere filed on 8/17/10	and assigned
Florida document number L10000085985		
- <del> </del>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
Yacht Surface Restoration LLC		
The new name must be distinguishable and end with the words "Limited Liabili	ty Company," the designation	on "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)		
The state of the s	·	
B. If amending the registered agent and/or registered offi	re address on our re	cords enter the name of the new
registered agent and/or the new registered office address here:	our re	enter the name or the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	-11
	Enier r ioriaa street	auuress
<del> </del>		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I have by account the approjectment as resistant descrit and account and		I Control of the

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 605, 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 Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member		Address  2015 NOV 16 PM 2: 25 Type of Action  TALLAHASSEE, FLORID.  Add		
<u>Title</u>	<u>Name</u>	Address 2015 NOV 16 PA	7 2: 25 Type of Action	
		ALLAHASSEE, FI	ORID;: □ Add	
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			□ Add	
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•	ttach additional sheets, if necessary.)
	FILED
,	2015 NOV 16 PM 2:2
	TALLAHASSEE, FLORIDA
	- CORIDA
(The effective date must be specific, cannot be prior to date of receipt or filed date the date this document is filed by the Florida Department of State)	(optional) ste and cannot be more than 90 days after
Dated Nov. 12+4, 2015	
Signature of a member of authorized  Jonathan Broughton	presentative of a member

Page 3 of 3

Filing Fee: \$25.00