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J. SAULSBERRY EXAMINER

JUN 1 2011

COVER LETTER

TO: Registration Sec Division of Corp		
SUBJECT:	Kevin Humphreys LLC Name of Limited Liability Company	_
	Name of Limited Liability Company	
The enclosed Articles of A	mendment and fee(s) are submitted for filing.	
Please return all correspon	dence concerning this matter to the following:	
	Name of Person	
	Name of Person	_
	NA	
	Firm/Company	····
	230 N. Cove Blul	
	230 N. Cove Blub Address	— : ">
	Pavama City FL 32401	ALLA
	City/State and Zip Code aub 1994 & hofmail. com E-mail address: (to be used for future annual report notification)	2011 HAY 31 SEUNETARY
	E-mail address: (to be used for future annual report notification)	
For further information cor	ncerning this matter, please call:	AM 8: 0
Kevin Hungh	rey/ at (850) 785-9043 Person Area Code & Daytime Telephone Num	06
Name of F	erson Area Code & Daytime Telephone Num	ber
Enclosed is a check for the	following amount:	
\$25.00 Filing Fee	(additional copy is enclosed) Certif	Filing Fee, icate of Status & ied Copy ional 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**

(Name of the Limited Liability Company	LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our record ability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Company	were filed on <u>8/19/2016</u>	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Sandbor Charters LLC The new name must be distinguishable and end with the words "Limite		
The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Company," the designat	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	230 N Cove	Blul
Principal office address MUST BE A STREET ADDRESS)	Panan City, F	6 32401
		72 28
Enter new mailing address, if applicable:		5 3
Mailing address MAY BE A POST OFFICE BOX)		R Y
3. If amending the registered agent and/or registered offi		nter the name of the ne
registered agent and/or the new registered office address here	:NA	***
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et address
	, Florid	la
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	2	
\sim	7	

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 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> **Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add ☐ Remove Add Remove ∏Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary. Dated 5/26/2011 Signature of a member or authorized representative of a member Patrick Kevin Humphreys
Typed of printed name of signee

Page 2 of 2

Filing Fee: \$25.00