

L10000118217

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

SEP 27 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: XTreme Marine Detail 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:

Marty Sheftel
Name of Person

XTreme Marine Detail LLC
Firm/Company

1777 Blount Road #511
Address

Pompano Beach, FL 33069
City/State and Zip Code

anythingntc@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marty Sheftel at (954) 865-1944
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)

☐ \$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**

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Xtreme Marine Detail LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on Nov. 15, 2010 and assigned Florida document number L10000118217.

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)

1777 Blount Road
#511
Pompano Beach, FL 33069

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1777 Blount Road
#511
Pompano Beach, FL 33069

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:

Martin A. Sheffel

New Registered Office Address:

1777 Blount Road #511

Enter Florida street address

Pompano Beach, Florida 33069
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.

Martin A. Sheffel
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>
MGRM	Tony M. Tagariello	300 Sunset Drive # 2 FT Lauderdale, Fl 33301	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Martin A Sheffel	1777 Blount Road #511 Pompano Beach, Fl 33069	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Dated September 23, 2011

Martin A Sheffel
Signature of a member or authorized representative of a member

Martin A. Sheffel
Typed or printed name of signee