L11000009510

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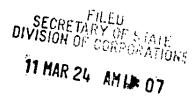
TO:

TO:	Registration Sect Division of Corpo					
SUBJE	CT,	HECKER MARIN	IE ENTERPRISES,	INC		
301301		Name of Limited Liability Company				
The en	closed Articles of A	nendment and fee(s) are sub	omitted for filing.			
Please	return all correspond	lence concerning this matter	to the following:			
			VIC GRANOWICZ			
			Name of Person			
		HECKER MARINE ENTERPRISES, LLC				
			Firm/Company			
		1220 APOLLO BEACH BLVD				
		Address				
APOLLO BEACH, FL 33572				2		
			City/State and Zip Code			
		E-mail address: (to be used for future annual report notification)				
For fur	ther information con	cerning this matter, please c	all:			
	VIC G	RANOWICZ	at (813_)	645-5594		
	Name of P	erson	Area Code & I	aytime Telephone Number		
Enclos	ed 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 end	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Registrati Division P.O. Box	G ADDRESS: ton Section of Corporations 6327 ec, FL 32314	Registration Division of C Clifton Build	Corporations		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HECKER MARINE ENTERPRISES, LLC



(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL11000009510	were filed on	1/21/2011	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	1220 APOLLO	O BEACH BLVD	
(Principal office address MUST BE A STREET ADDRESS)	APOLLO BEACH, FL 33572 US		
Enter new mailing address, if applicable:	1220 APOLL	O REACH BLVD	
Enter new maning audress, it applicable: (Mailing address MAY BE A POST OFFICE BOX)	1220 APOLLO BEACH BLVD APOLLO BEACH, FL 33572 US		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u>e</u> :	er Florida street addr	
	City	, Florida	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 **Type of Action** <u>Title</u> <u>Name</u> Address **MGRM** BRIAN C. HECKER **11218 WINN ROAD** ☐ Add Remove RIVERVIEW, FL 33572 US ☐ Add Remove ☐ Remove Remove $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARCH 21 Dated _ Signature of a member or authorized representative of a member VIC GRANOWICZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00