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D. BRUCE

APR 0 3 2012

EXAMINER

COVER LETTER

TO:

Registration Section

Division of C	orporations			
SUBJECT:	Waypoint Y	acht Services, LLC		•
SOBJECT:		nited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corres	oondence concerning this matte	er to the following:		
	 	Paul Keeney		
		Name of Person		
		Firm/Company		
	3	700 Lancewood Place Address	:	ੱ ਵੇਂਡ ਨ
	D	elray Beach, FL 33445	· · · · · · · · · · · · · · · · · · ·	AC B
	ŗ	City/State and Zip Code odkeeney@gmail.com (to be used for future annual report notifice		SET OF THE PORT OF
For further information	E-mail address: concerning this matter, please	•	ition)	
· Name	of Person	at ()	Telephone Number	
			·	
Enclosed is a check for	•			_
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing I Certificate of Certified Cop (additional co	f Status &
Regis Divisi	LING ADDRESS: tration Section ion of Corporations Box 6327	STREET/COURIE Registration Section Division of Corporat Clifton Building		
Tallah	nassee, FL 32314	2661 Executive Cent Tallahassee, FL 3230		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Waypoint Ya	acht Services		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appear I Liability Company)	rs on our records.	
The Articles of Organization for this Limited Liability Compar	ny were filed on	02-24-2011	and assigned
Florida document numberL11000023378			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company her	<u>e</u> :	
Keeney & Company Ya	acht Managemen	t, LLC	
The new name must be distinguishable and end with the words "Lin"L.L.C."	mited Liability Compa	ny," the designation '	LLC" or the abbreviation
Enter new principal offices address, if applicable:			47
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>
	· · · · · · · · · · · · · · · · · · ·		3 7
			SEE A
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of the registered of the new registered office address he		ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			WEURST.
	Ent	er Florida street add	dress
		, 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 = M	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
<u></u>			Add Remove
·			Add Remove
			Add Remove
			Add Remove
			Add Remove
). If amendi	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necesso	12 JPR -2 JAIII: II
Dated	March 28, 20		
-	Po	r or authorized representative of a member Keen Q / or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00