## #1/100035465

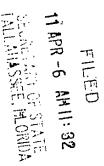
(Requestor's Name)			
(Address)			
(Address)			
· ,			
(City/State/Zip/Phone #)			
(Otyrotate/21ph Hone try			
PICK-UP WAIT MAIL			
(Business Entity Name)			
. (Document Number)			
,			
Certified Copies Certificates of Status			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



300194387193

04/06/11--01022--003 \*\*60.00



K. SALY EXAMINER APR & 2011

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Navigator Kayak Adventures, L.L.C. 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:
Michael S. Kimson
Firm/Company
410 Riviera St Address
Venice, FL 34285 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Kimson at (423) 895-3670  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$60.00 Filing Fee, \text{Certified Copy} \\ \text{Certified Copy} \\ \text{(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

TI APR -6 AMII:

Navigator Kayak  (Name of the Limited Liability (A Florida)	Adventures, L Company as it now appears of Limited Liability Company)	L. C JALLAHASSEE, M. OR.
The Articles of Organization for this Limited Liability C Florida document number 11000 3546	company were filed on <u>3/</u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
Venetian Home Watch, L. The new name must be distinguishable and end with the wor "L.L.C."	LC ds "Limited Liability Company	" the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address	ered office address on our ress <u>here</u> :	records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
<del></del>	Enter	Florida street address
		, Florida
	City	Zip Code
None Dogistaned Agent's Signature if about no Dogistaned	I A	

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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Ma or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> Name | **Address** Type of Acti ☐ Add ☐ Remove ☐ Add Remove ☐ Remove Add Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated April Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00