## L110000088986

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## **COVER LETTER**

TO: Registration Section **Division of Corporations** BIG TIME CHARTERS, 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: JOSHUA P. ALLEN Name of Person Firm/Company 1401 GRANT ROAD Address GRANT, FL 32949 City/State and Zip Code ALLEN2693@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Daytime Telephone Number Enclosed is a check for the following amount: □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy

**MAILING ADDRESS:** 

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co. (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comparing Lindon document number L11000088986	any were filed on AUGUST 2, 20	11 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
BLUE WATER FISHING COMPANY, LLC		
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:		<b>Z</b> = <b>-</b>
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		5 5
		SER CO
Enter new mailing address, if applicable:		सुन द (ग
Mailing address MAY BE A POST OFFICE BOX)		
		9 m cn
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l	l office address on our records, <u>c</u> <u>here</u> :	enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

**BIG TIME CHARTERS. LLC** 

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 605, 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 Authorized Member on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>Title</u>	Name	<u>Address</u>	Type of Action
<u> 1 1116</u>	Name	Address	Type of Action
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E. Effective date, if other than the date of filing:  (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)  Dated  AUGUST 15  2014  Signature of a member or authorized representative of a member	D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated AUGUST 15  Dated AUGUST 15  Dated AUGUST 15	1	
the date this document is filed by the Florida Department of State)  Dated AUGUST 15  Dated AUGUST 15		
the date this document is filed by the Florida Department of State)  Dated AUGUST 15  Dated		
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the date this document is filed by the Florida Department of State)  Dated AUGUST 15  2014  Dated AUGUST 15		
the date this document is filed by the Florida Department of State)  Dated AUGUST 15  2014  Dated AUGUST 15		
Dole P Sle	]. (	Effective date, if other than the date of filing:
Dole P SDE		Dated AUGUST 15 2014
Signature of a member or authorized representative of a member		Dole P SDR
		· · · ·
JOSHUA P. ALLEN  Typed or printed name of signee		

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Filing Fee: \$25.00