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EXAMINER



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SECRETARY OF STATE

12 JUL 20 PH 4:

COVER LETTER

	on Section f Corporations		•.			
SUBJECT:	SILENT HUNTE	R GAME FISHING, LLC				
		ited Liability Company				
The enclosed Artic	les of Amendment and fee(s) are sub	bmitted for filing.				
Please return all co	rrespondence concerning this matter	r to the following:				
	Tho	Thomas D. Wright, Esquire				
		of Thomas D. Wright, Charte				
	red					
		711 Overseas Highway				
Marathon, FL 33050 City/State and Zip Code						
	. ka	ite@keysclosings.com				
		to be used for future annual report notific	eation)			
For further informa	tion concerning this matter, please of	call:				
	Kate Hunt	&(743-8118			
١	lame of Person	Area Code & Daytime	Telephone Number			
Enclosed is a check	c for the following amount:					
\$25.00 Filing F	ee \$\int_\$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/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ations nter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SILENI (Name of the Limited	HUNIER GA	AIVIE FISHIN ny as it now appea	rs on our records.		-	
The Articles of Organization for this Limited L Florida document numberL1200007	iability Company			and	assign	ied
This amendment is submitted to amend the following	lowing:					
A. If amending name, enter the new name o	f the limited liab	oility company he	<u>re</u> :			
SILENT	HUNTER SP	ORT FISHING,	LLC			
The new name must be distinguishable and end wi'L.L.C."	ith the words "Lim	ited Liability Comp	any," the designation "I	LC" or t	he abb	reviatio
Enter new principal offices address, if appli	cable:	N/A				
(Principal office address MUST BE A STRE	ET <u>ADDRESS)</u>				22	

				AR ASSI	20	Ser major
Enter new mailing address, if applicable:	N/A		₩.c		371	
(Mailing address MAY BE A POST OFFICE			FLO	<u>-</u>		
				PRIO RIGI	<u></u>	
B. If amending the registered agent and registered agent and/or the new registered of	•		our records, enter	> the nam	<u>ie of t</u>	the ne
Name of New Registered Agent:	N/A					
New Registered Office Address:	N/A					
		E	nter Florida street add	lress		
		<u>-</u>	, Florida			
		City		Zip C	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member Type of Action **Title** <u>Name</u> **Address** N/A N/A ☐ Add ☐ Remove <u>N/A_</u> ☐ Add Remove ☐ Add Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A June 13 2012 Dated ____ Signature of a member or authorized representative of a member BARRY MEYER, SR.

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee