

L12 0000078044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

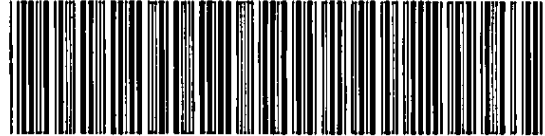
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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D. BRUCE  
OCT 19 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 3348 FLORAMAR 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:

CHARLES P. KALER

Name of Person

Firm/Company

732 BUTTONWOOD LANE

Address

BOYNTON BEACH FL 33436

City/State and Zip Code

CK@KALERSONLINE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHARLES P. KALER

Name of Person

at (561) 543-1760

Area Code

Daytime Telephone Number

Enclosed 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 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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3348 FLORAMAR LLC

The Articles of Organization for this Limited Liability Company were filed on 6-12-2012 and assigned Florida document number L21000078044

**If Changing Registered Agent, Signature of New Registered Agent**

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u>    | <u>Name</u>                     | <u>Address</u>                           | <u>Type of Action</u>   |
|-----------------|---------------------------------|--|---|
| MGRm            | STEN FALKUM                     | PO Box 3813<br>BOYNTON BEACH FL 33424    | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove<br><input type="checkbox"/> Change |
| MGRm            | DOLVERITIN A/S                  | DROWNING MAUDSGATE 1<br>0123 OSLO NORWAY | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove<br><input type="checkbox"/> Change |
| MGRm            | JORUNN GIGENES                  |  | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove<br><input type="checkbox"/> Change |
| MGRm            | PRESEN ASBJORNROD               |  | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove<br><input type="checkbox"/> Change |
| MEMBER          | GIGERNES HOLDING AS             |  | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove<br><input type="checkbox"/> Change |
| MANAGING MEMBER | NORWEGIAN FLORIDA HOLDINGS LLC. |  | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove<br><input type="checkbox"/> Change |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Handwritten signature across the lines.

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 9-4

2020

Handwritten signature of Charles P. Kalem

Signature of a member or authorized representative of a member

CHARLES P. KALEM

Typed or printed name of signee

Filing Fee: \$25.00