## 112000/046/9

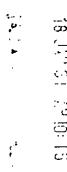
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Special Instructions to	Filing Officer:	

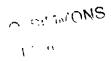
Office Use Only



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## **COVER LETTER**

	gistration Sec vision of Corp			
SUBTRATE		Marine, LLC		
SUBJECT:		Name of Limit	ed Liability Company	
The enclosed	d Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return	ı all correspon	dence concerning this matter to	o the following:	
		Andrea Cannon		
			Name of Person	
		Underwood & Roberts, PLI	LC	
			Firm/Company	
		3110 Edwards Mill Rd., Su	ite 100	
			Address	
		Raleigh, NC 27612		
			City/State and Zip Code	<del></del>
		acook@rlulaw.com E-mail address: (v	o be used for future annual report	notification)
For further i	information co	oncerning this matter, please ca		
Andrea Car	non		919 664-880 at ()	
	Name of	Person	Area Code Da	ytime Telephone Number
Enclosed is	a check for th	e 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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Moonshine Marine, LLC	
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Compan	ocars on our records.) y)
The Articles of Organization for this Limited Liability Company were filed on	08/04/2012 and assigned
Florida document number L12000104619	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	here:
Florida Sport Charters, LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	* (3)
(Principal office address MUST BE A STREET ADDRESS)	
	\$ - Th
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
<del></del>	
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our records, enter the name of the ne
Name of New Registered Agent:	
New Registered Office Address:	
Enter	Florida street address
	, Florida Zip Code

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

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			Add
			☐ Remove
			☐ Change
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			□ Remove
			Change
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			☐ Remove
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fective date, if other than th	e date of filing:	of filing or more than 90 days after filing.) Pursus	
in effective date is listed, the date mu ote: If the date inserted in this b	ist be specific and cannot be prior to date of block does not meet the applicable sta	of filing or more than 90 days after filing.) Pursus stutory filing requirements, this date will no	ını 10 605.02 ot be listed a
ocument's effective date on the I	Department of State's records.		
record specifies a delaye The 90th day after the re	:d effective date, but not an e cord is filed.	effective time, at 12:01 a.m. on th	e earlier
January 30	2018		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00