## #1 12000139937

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K. SALY EXAMINER NOV 2 7 2012

## **COVER LETTER**

TO: Registration Section
Division of Corporations

INDIFFER. Elite Boat 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:

John E. Hubbard Jr.

Name of Person

Elite Boat Charters, LLC

Firm/Company

4700 LB McLeod Rd Suite B2

Address

Orlando, FI, 32811

City/State and Zip Code

JohnH@elitegroup.tv

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

For further information concerning this matter, please call:

John E. Hubbard Jr

at (407) 292-9166

Name of Person

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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 12 NOV 26 PM 5: 34 SECRETARY OF STATE

Elite Boat Charters, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabilit	y Company were filed on Nove	ember 2, 2012	and assigned
Florida document number L12000139937	<del></del> •		
This amendment is submitted to amend the following	3:		
A. If amending name, enter the new name of the	limited liability company here:		
Elite Boat Rental, LLC			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	y," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:	<del> </del>		
(Principal office address MUST BE A STREET AL	ODRESS)		
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 a		r records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	City		Zip 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 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 **Address Type of Action** <u>Title</u> Name 1 Remove Remove Remove Remove

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	November 20, 2012.
	John 5 2/led /4
	Signature of a member or authorized representative of a member
	John Ĕ. Hubbard ∜r.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00