

L12000146987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

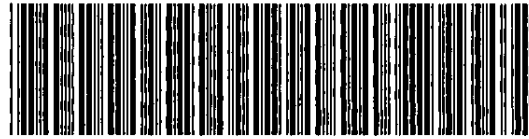
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

MAR 07 2013  
D. BRUCE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CENTANNI MARITIME, 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:

RICHARD J. FERRARO

Name of Person

CENTANNI MARITIME, LLC

Firm/Company

10521 VISCONTI Way

Address

PORT ST. LUCIE, FL 34986

City/State and Zip Code

CENMARINE@gmail.com

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

For further information concerning this matter, please call:

RICHARD J. FERRARO

Name of Person

at ( 561 ) 622-2212

Area Code & Daytime Telephone Number

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Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

CENTANNI MARITIME, 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 Liability Company were filed on 11/15/2012 and assigned Florida document number L12000146987.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

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:  
(Principal office address **MUST BE A STREET ADDRESS**)

10521 SW VISCONTI WAY  
PORT ST. LUCIE, FL 34986

Enter new mailing address, if applicable:  
(Mailing address **MAY BE A POST OFFICE BOX**)

10521 SW VISCONTI WAY  
PORT ST. LUCIE, FL 34986

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

NIKKI S. FERRARO

New Registered Office Address:

10521 VISCONTI WAY

Enter Florida street address

PORT ST. LUCIE

, Florida

City

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TALLAHASSEE, FLORIDA  
Zip Code 34986

**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.

Nikki S. Ferraro  
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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 FALLAHASSEE FLORIDA

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

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Dated 01 MARCH, 2013.

Richard J. Ferraro President/Owner  
Signature of a member or authorized representative of a member

RICHARD J. FERRARO

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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