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### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-63B3

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone : (561)694-8107

Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARGARITA MARINE HOLDINGS, LLC

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<del></del>	City	, Florida Zip Code
	Enter Fl	orida street address
New Registered Office Address:	F	
Name of New Registered Agent:		
B. If amending the registered agent and/or registered agent and/or the new registered office add		cords, enter the name of the new
	, and become products	
(Mailing address MAY BE A POST OFFICE BOX)		
Enter new malling address, if applicable:		
	· <u>-</u> · · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET ADDR	<u> </u>	
Enter new principal offices address, if applicable:		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," th	te designation "LLC" or the abbreviation
A. If amending nome, enter the new name of the limi	ited liability company here:	
This amendment is submitted to amend the following:		
Florida document number L12000152827	<del></del>	
The Articles of Organization for this Limited Liability C	ompany were filed on 12/06/2	012 and assigned
•		
(Name of the Limited Liability	Company as it now appears on o	ur records.)
MARGARITA	MARINE HOLDINGS, L	LC .

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 affice 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 Acont

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

Title MGRM	BOAN, ALAN	Address 1800 SE 7TH STREET	Type of Action
		FORT LAUDERDALE, FL 33316	Remove
		,	- Add
			l3
			- -
	***************************************	·	<del></del>
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			, Кеточе
			Add
			Remove

	the state of the s	•••
May 31st	2013	
May 31st	2013  Enoture for a member or authorized representative of a Papary	

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