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COVER LETTER

TO:

Registration Section

Divi	ision of Cor	porations			
	ALL MAR	INE LLC			
SUBJECT: Name of Limited Liability Company					
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.		
			_		
Please return	all correspo	indence concerning this matter	to the following:		
		TERRY W MOORE			
			Name of Person	4	
		ALL MARINE LLC			
			Firm/Company		
		685 SE 22 LANE			
Address					
		HOMESTEAD FL 33033			
			City/State and Zip Code		
		ALLMARINES@AOL.CO	M		
		E-mail address: (to be used for future annual report no	otification)	
For further in	formation c	oncerning this matter, please c	all:		
TERRY W M	MOORE		305 394-2002		
Name of Person		at () Area Code Dayti	me Telephone Number		
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	iling 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)	
	ling Addres		Street Address:		
_	gistration S		-	Registration Section	
	ision of C . Box 632	orporations	Division of Co The Centre of	- ·	
	lahassee, 1			roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALL MARINE LLC	
(<u>Name of the Limited Liability Company as it now ap</u> (A Florida Limited Liability Compa	pears on our records.) ny)
The Articles of Organization for this Limited Liability Company were filed on	12/17/2012 and assigned
Florida document number L12000157550	~ ;
This amendment is submitted to amend the following:	• • • • • • • • • • • • • • • • • • • •
A. If amending name, enter the new name of the limited liability company	v here:
	
The new name must be distinguishable and contain the words "Limited Liability Company." t	ho designation "LLC" or the abbreviation "LLC"
The new name must be distinguishable and contain the words. Entitled Elabority Company.	ine designation (1750) of the abbreviation (1750).
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	ir records, enter the name of the new regis
agent and/or the new registered office address here:	
Name of New Registered Agent: New Registered Office Address:	Florida street address
New Registered Office Address:	

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 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	DARLENE H MOORE	685 SE 22 LANE	□Add
		HOMESTEAD FL 33033	
			Change
			DAdd
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Remove
			□Change
			□Add
			□Remove
			□ Change

OWNERSHIP IN AI	LL MARINE LLC WILL BE 100% OWNED BY TERRY W MOORE, RESIGNATION
LETTER ON FILE V	WITH COMPANY,
neffective date is listed, the c te: If the date inserted in	an the date of filing:
cord specifies a delayed c s filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed	2024
$\overline{\mathcal{A}}$	
- fem	Signature of a member or authorized representative of a member