

LB000050617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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10/23/18--01006--021 **25.00

2019 OCT 29 10 40 AM

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11/9/18 25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MARI AZIMUT ATLANTIS 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:

GUSTAVO CANAMERO
Name of Person

MARI AZIMUT ATLANTIS LLC
Firm/Company

1521 Alton Rd
Address

Miami Beach, FL 33139
City/State and Zip Code

MARI YACHTCHARTERS@gmail.com
E-mail address: (to be used for future annual report notification)

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FEB 20 2010
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For further information concerning this matter, please call:

GUSTAVO CANAMERO at (786) 999-9070
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**

MARI AZIMUT ATLANTIS 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 10/25/18 and assigned Florida document number L13000050617.

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

GUSTAVO CANAMERO

New Registered Office Address:

1521 Alton Rd #536

Enter Florida street address

Miami Beach

Florida

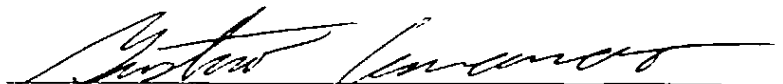
33139

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 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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Gustavo Canamero</u>	<u>1521 Alton RD #536</u>	<input checked="" type="checkbox"/> Add
		<u>Miami Beach, FL 33139</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>David Brown</u>	<u>1521 Alton RD #536</u>	<input checked="" type="checkbox"/> Add
		<u>Miami Beach, FL 33139</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Gamal Marwan</u>	<u>1521 Alton RD #536</u>	<input type="checkbox"/> Add
		<u>Miami Beach, FL 33139</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>AMBR</u>	<u>Mona Abdel Nasser</u>	<u>1521 Alton Rd #536</u>	<input type="checkbox"/> Add
		<u>Miami Beach, FL 33139</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated Thursday October 25, 2018

Quitero Cuameo
Signature of a member or authorized representative of a member

GUSTAVO CANAMERO
Typed or printed name of signer