13000051442

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B. BOSTICK DEC - 3 2013 EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	RA YA	CHTS LLC	
30BJEC1,	Name of Limite	ed Liability Company	
The enclosed Articles of A	nmendment and fee(s) are subm	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	ENRICO SCA	ARDA	
		Name of Person	
	ENRICO SCA	ARDA, P.C.	
		Firm/Company	
	38 KINGS HI	IGHWAY	
		Address	
	HAUPPAUG	E NY 11788	
	SCARDAPC@AC	City/State and Zip Code L.COM	
		be used for future annual report notification	on)
For further information co	ncerning this matter, please cal	11:	FAC 28
ARIELLE S	UCICH	at (631) 582-4800	2019 DEC
Name of	Person	Area Code & Daytime Te	lephone Number 3: 1
			<u> </u>
Enclosed is a check for the	following amount:		Pi 12:
\$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, Concentificate 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

	RA YACHTS LLC		
(<u>Name of the Limited Li</u> (A Fi	ability Company as it now appear orida Limited Liability Company)	rs on our records.	
The Articles of Organization for this Limited Liab Florida document numberL13000051442		4/8/13	and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	e limited liability company her	<u>'e</u> :	
RA LMY LLC			
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Compa	iny," the designation	"LLC" or the abbreviation
	•		
Enter new principal offices address, if applicab			<u></u>
(Principal office address MUST BE A STREET A	ADDRESS)		
Enter new mailing address, if applicable:			Zils Ot
- · · ·			12-
(Mailing address MAY BE A POST OFFICE BO	<u></u>		<u> </u>
	-		
B. If amending the registered agent and/or	registered office address on	our records, <u>ente</u>	r the name of the ne
registered agent and/or the new registered offic	e address here:		53
Name of New Registered Agent:			
New Registered Office Address:	En	ter Florida street a	addrass
	En	ier Fioriau sireet a	uur ess
-	<i>a.</i> .	, Florida .	7: 6:
	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 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 Type of Action **Title** <u>Name</u> <u>Address</u> Remove Remove Remove Add Remove Remove Remove

. If amending an	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted	
	Ednu Bentt
	Signature of a member or authorized representative of a member
	EDWARD BENNETT
-	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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