

LI3000078722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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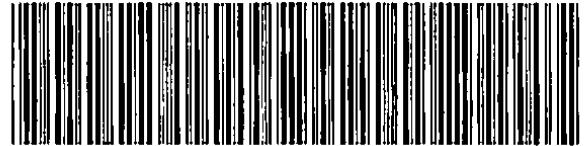
(Business Entity Name)

(Document Number)

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2019 FEB 25 P 12:54
TALLAHASSEE, FLORIDA
MAR 04 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ST. JOHN'S BOAT SALES, 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:

Stephen C. Moatz

Name of Person

St. John's Boat Sales

Firm/Company

500 Palmer St. #276

Address

Green Cove Springs, FL 32043

City/State and Zip Code

steve@stjohnsboatsales.com

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

For further information concerning this matter, please call:

Stephen C. Moatz

904

509-4867

at (_____) _____

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**

FILED

ST. JOHN'S BOAT SALES, 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 May 30, 2013 and assigned
Florida document number L13000078722

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:

St. John's Boat Sales, LLC

(Principal office address MUST BE A STREET ADDRESS)

1271 Energy Cove Ct.

Green Cove Springs, FL 32043

Enter new mailing address, if applicable:

St. John's Boat Sales, LLC

(Mailing address MAY BE A POST OFFICE BOX)

500 Palmer St. #276

Green Cove Springs, FL 32043

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:

Stephen C. Moatz

New Registered Office Address:

1271 Energy Cove Ct.

Enter Florida street address

Green Cove Springs

Florida 32043

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>
MGRM	Christopher E. Vann	3137 Falconer Dr. Jacksonville, FL 32223	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Ryan M. Haney	1088 Holly Oaks Ct. St. John's, FL 32259	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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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.

Dated February 22, 2019

 Signature of _____

Signature of a member or authorized representative of a member

Stephen C. Moatz

Typed or printed name of signee