L13000135376

| (Re | equestor's Name) | |
|---|---------------------|-----------|
| (Ac | ddress) | |
| (Ad | ddress) | |
| (Ci | ity/State/Zip/Phone | · #) |
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2019 SEP 30 PH 4: 08

COVER LETTER

TO: Registration Section
Division of Corporations

。Galahad Charters 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:

Dominic S. Nicosia

Name of Person

Firm/Company

4240 NW 10th St

Address

Cape Coral, FL 33993

City/State and Zip Code

lisaf@nicosiallc.com

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

For further information concerning this matter, please call:

Cindy Anderson

239)458-8181

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 Fec.
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

FILED 2013 SEP 30 PM 4: 08

ARTICLES OF ORGANIZATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

OF

Galahad Charters, LLC

| (<u>Name of the Limited L</u> (A F | <u>liability Company as it now appear</u> Porida Limited Liability Company) | s on our records.) | |
|--|--|--------------------------|------------------------|
| The Articles of Organization for this Limited Lial Florida document number L13000135376 | bility Company were filed on <u>Ser</u> | otember 25, 2013 | _ and assigned |
| This amendment is submitted to amend the follow | ving: | | |
| A. If amending name, <u>enter the new name of t</u> | the limited liability company her | <u>e</u> : | |
| The new name must be distinguishable and end with "L.L.C." | the words "Limited Liability Compa | ny," the designation "LL | C" or the abbreviation |
| Enter new principal offices address, if applical | ble: | | |
| (Principal office address MUST BE A STREET | ADDRESS) | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE B | <u>ox)</u> | | |
| B. If amending the registered agent and/or registered agent and/or the new registered offi | | ur records, enter th | e name of the new |
| Name of New Registered Agent: | 4 | | |
| New Registered Office Address: | Ent | er Florida street addre | ss |
| | | , Florida | |
| | 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

| <u>Name</u> | Address | Type of Action |
|--------------------|----------------------|------------------------------------|
| Dominic T. Nicosia | 4240 NW 10th St | ✓ Add |
| | Cape Coral, FL 33993 | Remove |
| | | Add Remove |
| | | Add Remove |
| | | Add Remove |
| | | Add Remove |
| | | Add Remove |
| | | Dominic T. Nicosia 4240 NW 10th St |

| D. If amending any other information, enter | er change(s) here: (Attach additional sheets, if necessary.) |
|---|--|
| • | |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| | |
| | |
| | |
| September 27 | 2013 |
| P8- | |
| Signature of a | n member or authorized representative of a member |
| Dominic S. Nicosia | |
| | Typed or printed name of signee |
| | Page 3 of 3 |

Filing Fee: \$25.00

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