L13000158411

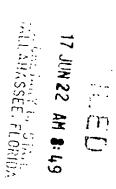
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name	e)
(De	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
:		:

Office Use Only



100300534991

05/22/17--01022--002 **30.00



JUN 2 :- 2717

;, =r

COVER LETTER

Division of Co			
SUBJECT:	Tampa Bay Mai	rine Services L. ited Liability Company	L.C.
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	I		
	Step	Name of Person	
	Tampa	Boy Marine Services	LLC.
	-	Firm/Company	
	7222 5.	Mascotte 57	
	Tomp	City/State and Zip Code City/State and Zip Code Cit/Ce 8 g m ² 1 · Com o be used for future annual report notif	
		City/State and Zip Code	
	thmarinese	ruke 8 gm2,1.com	
			ication)
	oncerning this matter, please ca	ill:	703E.
STY. Manaz	hen Labraie.	313 A332-0	3708
	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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

	ue Services LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Limit	mpany as it now appears on our record led Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Comparing	any were filed on $II/B/J3$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited I	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability 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)		7
making duaress man DE MI OST OTTICE BOA	******	33.5
		1882 1883 1883 1883 1883 1883 1883 1883
B. If amending the registered agent and/or registered registered agent and/or the new registered office address because the second of the seco		enter the name of the ne
Name of New Registered Agent:		\$ 6
New Registered Office Address:		
	Enter Florida street address	Y
		orida
	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, <u>enter the title, name, and address of each person</u> <u>being added</u> or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title Name Address Type of Action 7222 S. Moscotte St. Andd
Tampa FL. 33416 - Rem MGR Megan Stewart A □ Remove __

Change . □ Add _□ Remove □ Change □ Add Thange ... □ Change _□ Add ☐ Remove _□ Change □ Add ☐ Remove ☐ Change

A	dd_	DBA	51	tiff ch	narters	to	Jampa Br)	Myrice Servi	ices LL
AJ	d	MISR	Meg	an An	r Stew	art	to Tam/	na Bay Marin	<u> </u>
Le	عراباك	Re	pisteres	1 Ayen	t Ste	phen	J Labodit		
		-							
								2	17 July
								SSEE, FI	N 22 AM
effective dat : If the da	e is liste ite inser	d, the date noted in this	ne date of fi ust be specific block does n Department	e and cannot b iot-me c t thể	pe prior to dat applicable :	e of filing statutory	or more than 90 day filing requiremen	(optional) s after filing.) Pursual stathis date will not	to 605.020 the listed a
ecord sp e- 90t h-c	ecifies lay-aft	s a delaye ter the re	ed effectivecord is_file	ve date, b ed.	ut not an	effecti	Inmotion ve time, at 12	:01 a.m. on the	earlier (
i i		June	20H	20	<u> </u>		ative of a member		
			`						

Page 3 of 3

Filing Fee: \$25.00