

L17000171760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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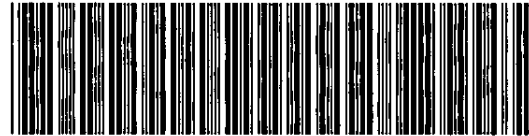
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13th Nov OCT 20 2014

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Guana Partners, 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:

Name of Person

Guana Partners, LLC

Firm/Company

121 Hawkeye View Lane, Suite #3

Address

St. Augustine, Florida 32095

City/State and Zip Code

guanapartners@guanamarinavillage.com

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

For further information concerning this matter, please call:

Brandy R. Haffner

800 790-6560

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**

GUANA PARTNERS, 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 12/12/2013 and assigned
Florida document number L13000171760.

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 end with 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)

121 Hawkeye View Lane

Suite #3

St. Augustine, Florida 32095

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

121 Hawkeye View Lane

Suite #3

St. Augustine, Florida 32095

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: Guana Partners Club, LLC

New Registered Office Address: 121 Hawkeye View Lane Suite #3

Enter Florida street address

St. Augustine, Florida 32095

City

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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.

Brandyn Haffer MGRM
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGR	My Sky Aviation Solutions, Inc	303B Anastasia Blvd #160	<input type="checkbox"/> Add
		St. Augustine, Florida 32080	<input checked="" type="checkbox"/> Remove
MGRM	Guana Marina Management, Inc.	c/o LC Hull & Co, Attorneys at Law	<input type="checkbox"/> Add
		700 Don Macay Blvd	<input checked="" type="checkbox"/> Remove
		PO Box, AB 20415 BH	
MGRM	Guana Marina Management, Inc.	c/o Alexiou, Knowles & Co.	<input checked="" type="checkbox"/> Add
		St. Andrews Court PO Box N4805	<input type="checkbox"/> Remove
		Nassau, Bahamas	
MGR	Brandy R. Bass-Haffner	131 N Palmetto Ave	<input type="checkbox"/> Add
		Flagler Beach, Florida 32136	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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 10

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

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated October 11, 2014



Signature of a member or authorized representative of a member

Brandy R. Haffner Manager/Member

Typed or printed name of signee

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Filing Fee: \$25.00

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