

From:

Division of Corporations

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Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Buccaneer Bay Adventures, 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 January 31, 2014______ and assigned Florida document number L14000017648

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 Liab	ility Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	P.n.
(Principal office address MUST BE A STREET ADDRESS)	En E T
	51:1 「
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	Q

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent aud/or the new registered office address here:

Name of New Registered Agent:	Cogency Giobal Inc.	
New Registered Office Address:	115 N. Cathoun Street, Suite 4	
	Enter Fl	orida street address
	Tallahassee	, Florida <u>32301</u>
	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 an 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.

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Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

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'ne	90th day after the record is filed.		

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

Dated	November 1 2017
	$(B \times)$
	Signature of a demitter or attriburized representative of a member
	Breit Jackson, Authorized Person
	Typed or printed name of signee



Filing Fee: \$25.00