

MAY 23 2014



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 2, 2014

PETER AMENDOLA  
17 BASS AVE  
KEY LARGO, FL 33037

SUBJECT: DOLPHIN WATER RENTALS LLC  
Ref. Number: L14000060249

We have received your document for DOLPHIN WATER RENTALS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 714A00009419

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

2014 MAY 14 AM 10:20

FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Dolphin Water Rentals 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:

Peter Amendola

Name of Person

Firm/Company

17 Bass Ave

Address

Key Largo, FL 33037

City/State and Zip Code

peteamendola@gmail.com

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

For further information concerning this matter, please call:

Peter Amendola

Name of Person

at 754 245-3261

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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TALLAHASSEE FLORIDA  
SECRETARY OF STATE

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

\_\_\_\_\_  
(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 4/14/14 and assigned  
Florida document number L14000060249.

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)

47B Shoreland Drive, Key Largo, 33037

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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: Peter Amendola

New Registered Office Address: 47B Shoreland Drive

*Enter Florida street address*

Key Largo, Florida 33037

*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 806, 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.*

Peter Amendola  
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member of 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	Peter Amendola	47B Shoreland Drive, Key Largo, 33037	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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FLORIDA STATE  
MAIL ADDRESS FLORIDA

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

In review, I changed the business address to:

47B Shoreland Dr, Key Largo, FL 33037

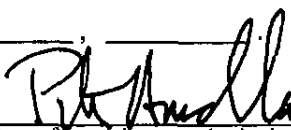
In addition, I wrote "MGR" instead of "Peter Amendola" for the Agent

So the new document should show 2 Agents, Peter and George

**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 \_\_\_\_\_



Signature of a member or authorized representative of a member

Peter Amendola

Typed or printed name of signee

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Filing Fee: \$25.00

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CLERK OF STATE  
TALLAHASSEE FLORIDA