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☐ PICK-UP	☐ WAIT ☐ MAI	L
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COVER LETTER:

Division of Corporations	
SUBJECT: DEEP BWE KAYAK FISHING LLC Name of Limited Liability Company	
Name of Limited Liability Company	
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The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ERIC MCDONALO	
ERIC MCDOWALD Name of Person	
DEEP BLUE KAYAK FISHING ULL Firm/Company	
2519 SW 4TH STREET Address	
Address	
BOYUTON BEACH FL 33435	
City/State and Zip Code	
BOYNTON BEACH, FL 33435 City/State and Zip Code deepblue kayakfishing @ amail. com E-mail address: (to be used for hadre annual report notification)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
For M. Davis	
FRIC McDourco at (586) 531-8113 Name of Person Area Code Daytime Telephone Number	
,	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$60.00 Filing Fee,	
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

Registration Section

TO:

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

	HING ILL			
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)			
The Articles of Organization for this Limited Liability (Florida document number <u>1400092685</u>	Company were filed on 6/4/2014 and assigned			
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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."				
The new name must be distinguishable and contain the words "Lin	nited 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 ADD)	RESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
[maning dualess MAT BE AT OST OFFICE BOA]				
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, enter the name of the new dress here:			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	, 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 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Title** <u>Name</u> <u>Address</u> **Type of Action** Matt ECKERT AMBR 3359 GARDENS EAST DR APT A _□ Remove PALM BEACH GARDENS, FL 33410 _□ Change AMBR ERK MLPONALD 2519 SW 4TH STREET □ Add BOYNTON BEACH, FL 33435 □ Remove

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Filing Fee: \$25.00