UY00003782

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| | tion Sect of Corp | | | | | |
|---------------------|----------------------|---|---|--|-----------------------|---|
| PAR SUBJECT: | RKK MA | RINE LLC | | | | |
| Sobster. | | Name of Limi | ted Liability Company | | | |
| The enclosed Arti | icles of A | mendment and fee(s) are subt | mitted for filing. | | | |
| Please return all c | correspon | dence concerning this matter t | to the following: | | | |
| | | Andrea Dardano-Portillo | | | | |
| Name of Person | | | | | | |
| PARKK MARINE LLC | | | | | | |
| | Firm/Company | | | | | |
| 12012 NW 13 Street | | | | भन्नु ज | | |
| | | | Address | | 第 等 丁 | ļ |
| | | Pembroke Pines, FL 33026 | · | | 6 6 | - |
| | | | City/State and Zip Code | | 11、至5 | |
| | | andrea.dardano@gmail.com | to be used for future annual report notifi | instian) | , ; ; , q, | |
| For further inform | nation co | ncerning this matter, please ca | · | Cation | 2 | |
| Andrea Dardano- | -Portillo | | ar (305) 9650 | 0907· | | |
| , | Name of | Person | Area Code Daytime | Telephone Number | | |
| Enclosed is a che | ck for the | e following amount: | | | | |
| □ \$25.00 Filing | g Fee | ■ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 Filing Certificate of Certified Co (additional cop | of Status & | |

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

| PARKK MARINE LLC | | • |
|---|---|---|
| (Name of the Lim | ited Liability Company as it now appea (A Florida Limited Liability Company) | ars on our records.) |
| The Articles of Organization for this Limited I Florida document number L14000123782 | Liability Company were filed on A | and assigned |
| This amendment is submitted to amend the fol | lowing: | |
| A. If amending name, enter the new name | of the limited liability company h | nere: |
| The new name must be distinguishable and contain the | words "Limited Liability Company," the | designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if appli | cable: | |
| (Principal office address MUST BE A STRE | ET ADDRESS) | '୍ଲ ଫା |
| Enter new mailing address, if applicable: | - | # F F F F F F F F F F F F F F F F F F F |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and registered agent and/or the new registered of | | on our records, <u>enter the name of the no</u> |
| Name of New Registered Agent: | Andrea Dardano-Portillo | |
| New Registered Office Address: | 12012 NW 13 Street | and the state of the same |
| | Pembroke Pines | orida street address |
| | City | , Florida $\frac{33026}{Zip\ Code}$ |

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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-------------------------|--|----------------|
| MGR | Luis Portillo Mayorga | 12012 NW 13 ST | |
| | | Pembroke Pines, FL 33026 | Remove |
| | | | □ Change |
| AMBR | Andrea Dardano-Portillo | 12012 NW 13 ST | ■ Add |
| | | Pembroke Pines, FL 33026 | ☐ Remove |
| | | | ☐ Change |
| | | | Add |
| | | | □ Remove |
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| fan effecti <u>Note:</u> If t | e date, if other than the date of filir tive date is listed, the date must be specific ar the date inserted in this block does not t's effective date on the Department of | nd cannot be prior to date of fill meet the applicable statuto | ng or more than 90 days after 11 | ling.) Pursuant to 605.0207 |
| e recor | rd specifies a delayed effective Oth day after the record is filed | date, but not an effec | ctive time, at 12:01 a. | m. on the earlier of |
| ine 90 | Oth day after the record is filed | | | -4 9 1 |
| Dated | September 4 | , 2015 | | 6 1 |
| | | Londille |) . | 24 5 5 5 |
| | Signature of a | a memberior authorized repres | entative of a member | 22 |
| | | | | ·• |

Page 3 of 3

Filing Fee: \$25.00