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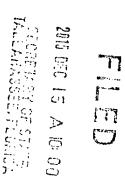
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DEC 16 2015

TO:

**Registration Section** 

Divis	ion of Cor	porations	
	 DGM MAF	RINE SERVICES LLC	
SUBJECT: _		Name of Lim	ited Liability Company
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.
Please return a	all correspo	endence concerning this matter	to the following:
		Nancy Luna	
		· · · · · ·	Name of Person
		Rocket Lawyer	
			Firm/Company
		5850 Granite Parkway, Su	ite 215
			Address
		Plano, TX 75024	
			City/State and Zip Code
		julzwood@me.com	The state of the s
For further inf	formation c	e-mail address: (	to be used for future annual report notification)
Nancy Luna			818 9671467 INTO P
	Name o	f Person	Area Code Daytime Telephone Number
Enclosed is a	check for tl	he following amount:	
■ \$25.00 Fil	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<b>84 . 17</b>	ING ADDDEGG	OTDERTIGOUPLED ADDRESS
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DGM MARINE SERVICES LLC				
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on 10/03/2014 and assigned			
lorida document number L14000155020				
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limited liab	pility company here:			
DGM Yachts Services LLC				
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."			
nter new principal offices address, if applicable:	525 SW 10th Avenue			
Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, FL 33312			
	525 SW 10th Avenue			
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, FL 33312			
. If amending the registered agent and/or registered o				
salara da	<del></del>			
Name of New Registered Agent:				
	25 (1) 100 money 1			
New Registered Office Address:	Enter Florida street address 13 4 CT maxima			
	Enter Provide Street data ess			
<del> </del>	City , Florida Zip Code			
	Chy Sp Zip Code			

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
		<del></del>	Remove
			☐ Change
			Add
	,		□ Remove
			Change
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Effectiv	ve date, if other than to	the date of filing	cannot be prior to	late of filing or more than	(optional)	uant to 605 0207
Note: I	If the date inserted in this	block does not m	eet the applicabl	statutory filing requi	rements, this date will :	not be listed as
aocume	ent's effective date on the	: Department of St	ate s records.			
he reco	ord specifies a delay	ved effective d	ate but not a	n effective time	at12·01a mont	he earlier of
	90th day after the r		accy but not a	ir cricative arries		
	Dagambar 7					
Dated _	December 7	,	2015			
		Tran	is Motor	Jar 2110		
		Signature of a m	ember or authoriz	ed representative of a m	ember	
		Dav	in Mu	Har Ello ed representative of a mo r UPEIL		,
			Typed or printed i	ume of signee		<del></del>

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