

L14000162999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

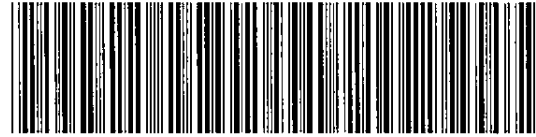
(Business Entity Name)

(Document Number)

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NEW YORK, NY 10014

S. WARREN

JUN 30 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Austin Parker Yachts USA 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:

Maria Palacios

Name of Person

Austin Parker Yachts USA LLC

Firm/Company

8430 SW 8th St #B204

Address

Miami FL 33144

City/State and Zip Code

austinparkeryachtsusa@gmail.com

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

For further information concerning this matter, please call:

Maria Palacios

at (305) 322-2893

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(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

Austin Parker Yachts USA LLC

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:

MGR = Manager

AMBR = Authorized Member

Correct Name
AND Address

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

Mgr	Sebastiano Giovanni Gravagno	Avda Rius I Taulet, 84	<input type="checkbox"/> Add
-----	------------------------------	------------------------	------------------------------

Pis1, Pta 1, Sant Cugat del Valles, Barcelona Spain 08173

☐ Remove

NOTE: this is not adding or changing to new member.

☐ Change

IT CORRECTION OF MISTAKE IN MGR . NAME

appears as :			<input type="checkbox"/> Add
	GRAVAGNO, GIANNI S		

AND SHOULD BE:

SEBASTIANO GIOVANNI GRAVAGNO

☐ Remove

☐ Change

	Also new address for Mr Gravagno		<input type="checkbox"/> Add
	as above		

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

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STATE
OF FLORIDA
CLERK OF THE COURT

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

Note:

This is not adding but correcting name of Member to:
Sebastiano Giovanni Gravagno

and changing his address to:

Avda Rius I TAULET, 84
Pis 1, Pta 1
Sant Cugat del Valles,
Barcelona Spain 08173

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated June 27, 2017



Signature of a member or authorized representative of a member

Maria Palacios

Typed or printed name of signee

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TALLAHASSEE, FLORIDA