

L14000164560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

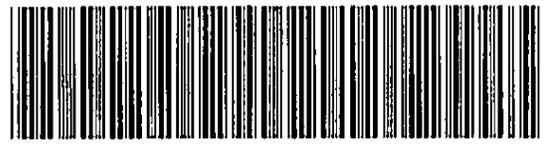
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2020 JAN 24 PM 1:47
REGISTRATION DIVISION
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

Amend

FEB 24 2020
ALBRITTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Siesta Key Watersports, 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:

David ODell
Name of Person
Siesta Key Watersports, LLC
Firm/Company
1536 Stickney Point Road
Address
Sarasota, FL 34231
City/State and Zip Code
skwatersports@gmail.com
E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call:

Benjamin Marchand at (941) 961-8288
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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



2020 FEB 24 AM 11:56

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 5, 2020

DAVID ODELL
1536 STICKNEY POINT ROAD
SARASOTA, FL 34231

SUBJECT: SIESTA KEY WATERSPORTS, LLC
Ref. Number: L14000164560

We have received your document for SIESTA KEY WATERSPORTS, 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):

You failed to make the correction(s) requested in our previous letter.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 420A00002616



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 17, 2020

DAVID ODELL
1536 STICKNEY POINT ROAD
SARASOTA, FL 34231

SUBJECT: SIESTA KEY WATERSPORTS, LLC
Ref. Number: L14000164560

We have received your document for SIESTA KEY WATERSPORTS, 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):

The document must also contain the address of the registered agent which must be at a Florida street address.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 420A00001354

2020 FEB -3 PM 1:31

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Siesta Key Watersports, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2020 JAN 24 PM 1:47
SUCRE INCORPORATED
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 3/18/2002 and assigned
Florida document number 114000164560

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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:

Benjamin Marchand

New Registered Office Address:

1536 Stickney Pt. Rd
Enter Florida street address

Sarasota, Florida 34231
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mr	David ODell	1536 Stickney Point Road	<input type="checkbox"/> Add
		Sarasota, Fl. 34231	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Benjamin Marchand	1536 Stickney Point Road	<input checked="" type="checkbox"/> Add
		Sarasota, Fl. 34231	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Multiple horizontal lines for amending information.

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 December 10 2019

Handwritten signature of David O'Dell

Signature of a member or authorized representative of a member

David O'Dell

Typed or printed name of signee

Filing Fee: \$25.00