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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

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Division of Con			
Barracuda SUBJECT:	Boat & RV Storage-Edgewater	: LLC	
30B3EC1	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Raymond M. Ivey		
		Name of Person	
	SCRUGGS, CARMICHA	EL & WERSHOW, P. A.	
		Firm/Company	
	2234 NW 40th Terrace, Su	nite B	
		Address	
	Gainesville, FL 32605		
		City/State and Zip Code	
	mike@boatrvstorage.com	to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	•	,
Raymond M. Ivey	,,	352 376-5242	
	of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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 Addres		Street Address:	***
Registration : Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Barracuda Boat & RV Storage-Edgewater, LLC

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

OHOH A)	a Linned Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on February 11, 205 2 015	and assigned
Florida document number L1500002578	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
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)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, enter the na	me of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr e ss	
	, 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 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>	Address	Type of Action
MGR Michael Stanley	Michael Stanley	195 SW 129th Terrace	
		Newberry, FL 32669-2787	■Remove
			□ Change
AMBR	Michael Stanley	195 SW 129th Terrace	■Add
		Newberry, FL 32669-2787	□Remove
			Change
MGR Michelle Shugar	195 SW 129th Terrace	[]Add	
		Newberry, FL 32669-2787	■ Remove
			□Change
AMBR Michelle Shugar	Michelle Shugar	195 SW 129th Terrace	■Add
		Newberry, FL 32669-2787	
			☐ Change
			□Add
		☐ Change	
			□Add
			□Remove
			□ Chunga

D. If amending any other inform	mation, enter change(s) here: (Attach additional sheets, if necessary.)	
 		
		
E. Effective date, if other than t (If an effective date is listed, the date r Note: If the date inserted in this document's effective date on the	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 is block does not meet the applicable statutory filing requirements, this date will not be listed	207 (3)(t as the
If the record specifies a delayed effect record is filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	he
Dated <u>December</u> Muchael	5, 2019	
Michael	Signature of a member or authorized representative of a member	
Michael Stanley		
	Typed or printed name of signee	

Filing Fee: \$25.00