

115000029468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

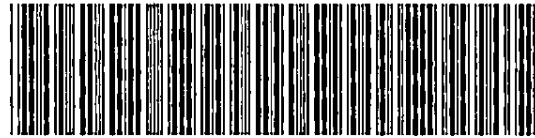
(Document Number)

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2022 JAN -3 AM 11:56

SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Fish Lauderdale 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:

Robert Conroy

\_\_\_\_\_  
Name of Person

Fish Lauderdale LLC

\_\_\_\_\_  
Firm/Company

2118 Rodman Street

\_\_\_\_\_  
Address

Hollywood, Florida 33020

\_\_\_\_\_  
City/State and Zip Code

Captbcjr56@gmail.com

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

For further information concerning this matter, please call:

Bob Conroy

954

614-3625

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

2022 JAN -3 AM 11:56

Fish Lauderdale LLC

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

SECRETARY OF STATE  
TALLAHASSEE, FL 32399

The Articles of Organization for this Limited Liability Company were filed on 02/17/2015 and assigned  
Florida document number L15000029468.

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)**

2118 Rodman Street

Hollywood, FL 33020

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2118 Rodman Street

Hollywood, FL 33020

**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:**

Robert Conroy

**New Registered Office Address:**

2118 Rodman Street

*Enter Florida street address*

Hollywood

*City*

Florida 33020

*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.*

\*

*[Signature]*  
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>                      |
|--------------|---------------------|--|--|
|              | William Guy Molinet | 1000 SW 8th Ave, Fort Lauderdale, FL 33315 | <input type="checkbox"/> Add               |
|              |                     |  | <input checked="" type="checkbox"/> Remove |
|              |                     |  | <input type="checkbox"/> Change            |
| mjr          | Robert Conroy       | 2118 Rodman Street                         | <input checked="" type="checkbox"/> Add    |
|              |                     | Hollywood, Florida 33020                   | <input type="checkbox"/> Remove            |
|              |                     |  | <input type="checkbox"/> Change            |
|              |                     |  | <input type="checkbox"/> Add               |
|              |                     |  | <input type="checkbox"/> Remove            |
|              |                     |  | <input type="checkbox"/> Change            |
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|              |                     |  | <input type="checkbox"/> Change            |

[illegible]

**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.

Dated December 13, 2021

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**