

**LL500000 40118**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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03/20/17--01036--001 \*\*25.00

2017 MAR 20 P 4:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**S Warren**

**MAR 22 2017**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Outpost Marine Group 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:

Joseph Petrantonio  
Name of Person

Outpost Marine Group LLC  
Firm/Company

1925 US 19 N, Holiday, FL 34681  
Address

City/State and Zip Code

cpetrant@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Constance Petrantonio at (727) 639-8755  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |                                             |                                                                        |                                                                                                  |                                                                                                                            |
|---------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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

Outpost Marine Group LLC

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

The Articles of Organization for this Limited Liability Company were filed on 3/14/17 and assigned  
Florida document number L15000040118

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)**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

Joseph Petrantonio

New Registered Office Address:

1540 Riverside Dr  
Enter Florida street address

Tarpon Spring, Florida FL 34689  
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.*



3/14/17

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> |
|--------------|-------------|----------------|-----------------------|
|--------------|-------------|----------------|-----------------------|

MGR Joseph Petrantoni 1540 Riverside Dr ☒ Add  
Tarpon Springs, FL ☐ Remove  
34689 ☐ Change

MGR David Petrantonio ☐ Add

\* Remove David Petrantonio ☒ Remove

off of the LLC ☐ Change

completely

MGR Constance Petrantonio 1540 Riverside Dr ☒ Add  
Tarpon Springs, FL ☐ Remove  
34689 ☐ Change

|  |  |  |                                 |
|--|--|--|---------------------------------|
|  |  |  | <input type="checkbox"/> Add    |
|  |  |  | <input type="checkbox"/> Remove |
|  |  |  | <input type="checkbox"/> Change |
|  |  |  | <input type="checkbox"/> Add    |
|  |  |  | <input type="checkbox"/> Remove |

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TAMPA, FLORIDA  
☐ Change  
☐ Add  
☒ Remove  
☐ 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 3/17/17, \_\_\_\_\_

Signature of a member

Signature of a member or authorized representative of a member

Joseph Petrantoni

Typed or printed name of signee

**Filing Fee: \$25.00**

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2017 MAR 20 P 4:37  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA