## L150000055642

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12/11/20

## . COVER LETTER

TO:

Registration Section

Divi	sion of Corp	porations				
	LAWLESS SPORTFISHING CHARTERS LLC					
SUBJECT:	Name of Limited Liability Company					
The enclosed	Articles of a	Amendment and fee(s) are sub	nitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		٨	MORGAN MCGRATH			
			Name of Person	<del></del>		
		LAWLESS SPO	Name of Limited Liability Company  Int and fee(s) are submitted for filing. Interning this matter to the following:  MORGAN MCGRATH  Name of Person  LAWLESS SPORTFISHING CHARTERS LLC  Firm/Company  648 RIVERSIDE ROAD  Address  NORTH PALM BEACH, FL 33408  City/Nate and Zip Code  @lawlesssportlishing.com  E-mail address: (to be used for future annual report notification)  this matter, please call:  1786  1876  18			
			Firm/Company			
		64	Name of Limited Liability Company  and fee(s) are submitted for filing.  Perning this matter to the following:  MORGAN MCGRATH  Name of Person  LAWLESS SPORTFISHING CHARTERS LLC  Firm/Company  648 RIVERSIDE ROAD  Address  NORTH PALM BEACH, FL 33408  City/Nate and Zip Code  dawlesssportfishing.com  E-mail address: (to be used for future annual report notification)  is matter, please call:  786  Area Code  Daytime Telephone Number  amount:  OFiling Fee & Certified Copy (additional copy is enclosed)  Street Address:  Registration Section Division of Corporations			
			Address			
	Name of Limited Liability Company  losed Articles of Amendment and fee(s) are submitted for filing.  eturn all correspondence concerning this matter to the following:  MORGAN MCGRATH  Name of Person  LAWLESS SPORTFISHING CHARTERS LLC  Firmi/Company  648 RIVERSIDE ROAD  Address  NORTH PALM BEACH. FL 33408  City/Natae and Zip Code  morgan@lawlesssportfishing.com  E-mail address: (to be used for future annual report notification)  her information concerning this matter, please call:  iAN MCGRATH  Name of Person  Area Code  Daytine Telephone Number  and is a check for the following amount:  st. 5.00 Filing Fee  Certificate of Status  Certified Copy (additional cupy is enclosed)  Mailling Address:  Registration Section  Division of Corporations  P.O. Box 6327  The Centre of Tallahassee					
			·			
				(faution)		
For further in	nformation c			meaning		
		f Person	at ( )	ne Telephone Number		
	rame o	110000	, men sout	······································		
Enclosed is a	check for th	ne following amount:				
<b>■</b> \$25,00 F	Filing Fee		Certified Copy	Certificate of Status & Certified Copy		
				ection		
Division of Corporations		Division of Co	rporations			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 DEC -7 PM 1: 17

LAWLESS SPORTFISHING CHA	ARTERS LLC	1010 0 FC - 1 by 1: 11
(Name of the Limit	ted Liability Company as it now app (A Florida Limited Liability Compan	rears on Sint Fre Transport Y OF STATE  TALLAHASSEE, FL
The Articles of Organization for this Limited L Florida document number L15000055642		ヘクリフェリー
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liability company	here:
The new name must be distinguishable and contain the v	vords "Limited Liability Company," t	ne designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	
Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
B. If amending the registered agent and/or agent and/or the new registered office addre	•	r records, enter the name of the new register
Name of New Registered Agent:	MORGAN MCGRATH	
New Registered Office Address:	648 RIVERSIDE ROAD	
	Enter	Florida street address
	NORTH PALM BEACH	. Florida 33408

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Address	Type of Action
MGR	ALEXANDER F ROSS	648 RIVERSIDE ROAD	
		NORTH PALM BEACH, FL 33408	■Remove
			□Change
			□Remove
			□Change
		_ <del>.</del>	□Add
			□Remove
			Change
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			□Remove
			□ Change
			Remove
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			□Remove
			□Change

	<u> </u>	
E ee		
If an e Note:	ive date, if other than the date of filing:	
e reco rd is t	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t led.	he
Dated	AUGUST 14 2020	
	Signature of a member or authorized representative of a member	

Typed or printed name of signee