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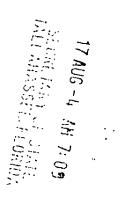
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AUG 07 2017 J SHIVERS

COVER LETTER

TO: Registration Se Division of Cor		•		
SUBJECT: FO	ther and Sond Sond Sond Sond Sond Sond Sond So	ns Fisheries	LLC.	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
	Richard	Name of Person	125	
	Father	Firm/Company	Fisheries L	ڵڔ
	6680 Ga	Aden Gate Par	KWAY	
	Napies,	Florida 34 City/State and Zip Code	105	
	Cichena Cov E-mail address: (to be used for future annual report notice	CANCO COM fication)	
For further information e	oncerning this matter, please ca	all:		
Devise e Name o	Person	at (305) 896 Area Code Daytim	e Telephone Number	
Enclosed is a check for the	ne following amount:			
\$25.00 Fiting 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 enclo	

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.

Name of the Limited Liability Compa (A Florida Limited Liability Compa)	ny as it now appears on our records.) Lability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L15000160503</u> .	were filed on $69/21/2015$ and assigned
This amendment is submitted to amend the following:	17
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Naples, Florida 34805
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Ide80 Golden Gat Parkway Nagles, Florida 34105
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent: Richard	1 H. McPhillips III
New Registered Office Address: LUSO C	Lan Conte Par Kway Enter Florida street address
Napi	es .Florida 34105 City Zip Code
New Registered Apent'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 Chapping Registered Agent, Signature of New Registered Agent-

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person occurs or removed from our records:

	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	Richard High Methillips	61080 Goldon Gate Parkway	Add
•		Naples Florida 3410	S_□ Remove
		· · · ·	J Change
Mar	Michael C. McPhillips	20742 and AUENUE West	1 —□ Add
		Cudjon Key Gorida 33042	Remove
		33042	Change
MGR	Richard Hugh McPhillips	TR 6680 Golden Gate Purker	Andd)
1		Naples, Florida	🗆 Remove
	•	34105	Change
MGR	Denise McPhillips	20742 2nci Ave West.	🖸 Add
		Cudjoe Key Florida	Remove
		33042	
			🗆 Add
			□ Remove
			Change
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			Remove
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in effective date is listen ote: If the date inser	er than the date of d, the date must be spec- ted in this block doe late on the Departme	cific and cannot be so not meet the a	prior to date of fil oplicable statute	ing or more than 90 cory filing requirement	_ (optional) lays after filing.) I ents, this date w	Pursuant to 605.020 ill not be listed a:
record specifies The 90th day aft	s a delayed effecter the record is	tive date, bu	t not an effe	ctive time, at 1	2:01 a.m. o	n the earlier o
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Page 3 of 3

Filing Fee: \$25.00