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## **COVER LETTER**

TO:	Registration Se Division of Cor			
emane		/IL FISHING LLC		
SUBJEC		Name of Lim	ited Liability Company	<u> </u>
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Gary S. Lachman		
			Name of Person	
			Firm/Company	
		5604 N. Ocean Boulevard		
			Address	· · · · · · · · · · · · · · · · · · ·
		Ocean Ridge, Fl. 33435		
			City/State and Zip Code	<del> </del>
		Gary.Lachman@gmlaw.com		
		E-mail address: (	to be used for future annual report notif	ication)
For furth	ier information co	oncerning this matter, please ca	all:	
Casey V			at () 838-4504 Area Code Daytime	
	Name of	f Person	Area Code Daytime	e Telephone Number
Enclosed	I is a check for th	ne 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, Ft. 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

BLUE DEVIL FISHING LLC		
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 01/05/2016	and assigned
Florida document number L16000001500	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	tited liability company here:	18 1.ALI
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" o	r the abbreviation "EL.C."
Enter new principal offices address, if applicable:		- SS - 5 円
Principal office address MUST BE A STREET ADDI	RESS)	
		9 0
		10
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, lress here:	enter the name of the ne
Name of New Registered Agent:		<del></del>
New Registered Office Address:	Enter Florida street address	<del> </del>
	vnier r toriau street audress	
<del></del>	, Flori	da
	Cuy.	лір Соае

## 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Stephen L. Magassy	5604 N. Ocean Boulevard	■ Add
		Ocean Ridge, FL 33435	Remove
		<del></del>	Change
AMBR	Matthew C. Magassy	5604 N. Ocean Boulevard	
		Ocean Ridge, FL 33435	☐ Remove
			Change
<del></del>			Add
			□ Remove
			Change
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Note: If the date in	other than the date of isted, the date must be spo- iserted in this block do be date on the Departm	es not meet the app	plicable statutory i	or more than 90 days aft lling requirements, th	tional) er filing.) Pursuant to 605.0207 sis date will not be listed as
	ies a delayed effe after the record is	ctive date, but ; filed.	not an effectiv	e time, at 12:01	a.m. on the earlier of
he record specif The 90th day					
he record specif The 90th day Dated January 3	eng f.	2018 Line of a member or a	uthorized represent	nive of a member	

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Filing Fee: \$25.00