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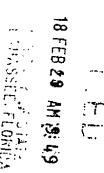
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COVER LETTER

Division of Corporations
SUBJECT: BlackWater Marine & Diriz 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:
Travis G. Lindsay Name of Person
Blackwater Marine + Diesel UC Firm/Company
2026 Cemetery Rd.
Holiday, FL. 34491 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TVAVIS LINASEY at (727) 910-1836 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Solution Sta

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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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

Blackwater Manne & Dievel LLC

(A Florida Limited L	iability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1000604055</u> .	were filed on 0 104 2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	
The new name must be distinguishable and contain the words "Limited Liability of the contain the contain the words "Limited Liability of the contain the c	ity Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1470 RANVILLE rOAD, SUITE 8 TAGGON SIGNINGS, FL 34689
(Principal office address MUST BE A STREET ADDRESS)	Tagan Zonigs, Fl 34684
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 1886 Tayon Springs, FL, 34688
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the new
Name of New Registered Agent:	: · · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Enter Florida street address
	City Florida :: 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.

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>Address</u> **Type of Action Title** <u>Name</u> _□ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change □ Add ☐ Remove _□ Change

). If amending any other information, enter	r change(s) here: (Attach ada	litional sheets, if necessa	ry.)	
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Effective date, if other than the date of fil (If an effective date is listed, the date must be specific	and cannot be prior to date of filing c	r more than 90 days after filing) 📑 " g.) Pursuani	-
Note: If the date inserted in this block does not document's effective date on the Department of	ot meet the applicable statutory fi	ling requirements, this date	e will not	be listed as
average and or the respiration of	World System.			
the record specifies a delayed effective		e time, at 12:01 a.m.	on the	earlier of
b) The 90th day after the record is file	d.			
Dated				
2. (
Signature of	f a member or authorized representat	ive of a member		
				
	LINASOY Typed or printed name of signed			

Page 3 of 3

Filing Fee: \$25.00