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(Requestor's Name)
(Address)
(Address)
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(C) (O) (T) (D)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filling Officer.

Office Use Only



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COVER LETTER

то:	Registration Se Division of Cor			
418188	Beach Jet			
SUBJ	ECT:		ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Holly Perry		
			Name of Person	
		Beach Jet Ski LLC		
			Firm/Company	
294 Windward Passage Box 723				
			Address	
		Clearwater Beach, FL 3	3767	
		gregoryrauckhorst@gmai	City/State and Zip Code	<u> </u>
		E-mail address: (to be used for future annual report notific	cation)
For fu	rther information co	oncerning this matter, please co	all:	
Greg	Rauckhorst		727 207-4904	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
■ \$2	5.00 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, FL 32314

Registration Section Division of Corporations Clifton Building

STREET/COURIER ADDRESS:

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Company as it now appears on our records. mited Liability Company)	.)
npany were filed on 4/5/2016	and assigned
d liability company here:	
Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
<u>SS)</u>	
	,
	.•
ed office address on our records,	enter the name of the ne
<u>s here</u> :	
Enter Florida street uddress	
	rida
1 2	d liability company here: Liability Company," the designation "LLC"

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>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Holly Perry	216 Ficketts Point Road Milbridge, ME 04658	_
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in effective date is listed, the date must	ek does not meet the applicable statuto	(optional) ing or more than 90 days after filing. Pursuant to 605.020 ry filing requirements, this date will not be listed a
record specifies a delayed The 90th day after the reco		ctive time, at 12:01 a.m. on the earlier o
October 11	2018	
1/		
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Page 3 of 3

Filing Fee: \$25.00