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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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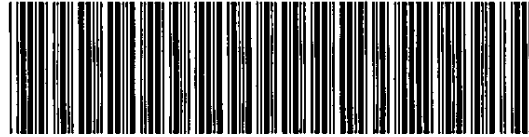
(Business Entity Name)

(Document Number)

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Y SULKER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE YACHT RIGGER 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:

RONALD W. GREGORY, II

Name of Person

GREGORY LAW FIRM, P.L.

Firm/Company

3801 Park Street North, Suite 4

Address

St. Petersburg, FL 33709

City/State and Zip Code

rgregory@gregorylaw.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RONALD W. GREGORY, II

727
at ()

374-9200

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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, 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**

THE YACHT RIGGER LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 6, 2016 and assigned
Florida document number L16000068290.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

RONALD W. GREGORY, II

New Registered Office Address:

3801 Park Street North, Suite 4

Enter Florida street address

St. Petersburg

Florida 33709

City

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.


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>	<u>Type of Action</u>
AMBR	Stephen Lloyd	7849 3rd Avenue South	<input type="checkbox"/> Add
		St. Petersburg, FL 33707	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Richard A. Lloyd	7849 3rd Avenue South	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL 33707	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Brian R. Ford	2241 Spanish Vistas Drive	<input checked="" type="checkbox"/> Add
		Dunedin, FL 34698	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change


10 JUL 5 PM 1:50
ALLAHASSEE, FLORIDA

16 JUL 15 PM 1:58
DEPT OF STATE
FALLAHASSE, FLORIDA

16 JUL 15 PM 1:53
FALLAHASSE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated July 12, 2016

 7/12/2016
Signature of a member or authorized representative of a member

Stephen Lloyd

Typed or printed name of signee