## 116000123449

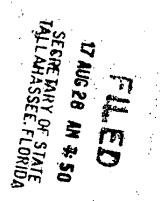
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200302876172

08/28/17--01029--006 \*\*55.00



## **COVER LETTER**

TO:	Registration So Division of Co						
Of the tre		LE MARINE HELISTOP HEL	LIBOAT, LLC				
SUBJE		Name of Lim	ited Lisbility Company				
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please	return all correspo	ondence concerning this matter	to the following:				
		LYNDA MARIANO					
		<del></del>	Name of Person				
		ILANDMIAMI					
Firm/Company							
		Address					
		MIAMI, FL. 33109					
		5-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					
		LYNDAMARINO@GMAII	L.COM  o be used for future annual report notifi	cation)			
For fur	her information c	oncerning this matter, please ca	·	casony			
LYND	A MARINO		305 984-2331 at ( )				
•	Name o	f Person	Area Code Daytime	Telephone Number			
Enclose	ed is a check for th	e following amount:					
□ \$25	3.00 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

NAVIGABLE MARINE HELISTOP HELIBOAT, 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 JUNE 28, 2016 and assigned Florida document number L16000123449 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ILANDMIAMI, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: 5212 FISHER ISLAND DRIVE (Principal office address MUST BE A STREET ADDRESS) MIAMI, FL 33109 Enter new mailing address, if applicable: **5212 FISHER ISLAND DRIVE** (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL 33109 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: LYNDA MARIANO Name of New Registered Agent: 5212 FISHER ISLAND DRIVE New Registered Office Address: Enter Florida street address Florida 33105 MIAMI City

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

☐ Change

	<del></del>	
····		
., <b>∑</b> .		
A H		
<u>노</u> 하	<u>a</u>	
SSE X	8	-
<u></u> 2	=	779
ORIA		
<del>ੂਨੇ</del> ਜੋ	<b>Ö</b> —	

Page 3 of 3