

216000173180

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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3 SIMMONS  
SEP 22 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** OUTNUMBERED MARINE ADVENTURES LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

JOHN P STEINLE

(Contact Person)

MARNICH II LLC

(Firm/Company)

7217 SOUTH FLAGLER DRIVE

(Address)

WEST PALM BEACH, FL 33405

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN STEINLE

(Name of Contact Person)

at ( 917 ) 414-4383  
(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

FILED  
18 SEP 19 PM 9:48  
TALLAHASSEE, FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: OUTNUMBERED MARINE ADVENTURES LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L16000173180

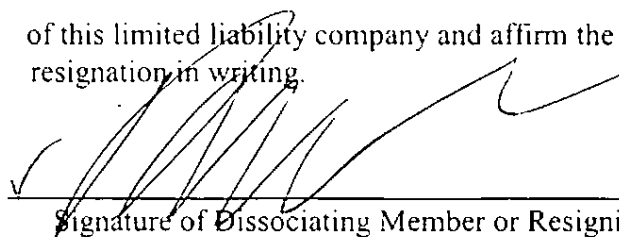
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/7/18

4. I, RICHARD S JOHNSON JR, hereby withdraw/resign as a  
(Print Name of Person Resigning)

AMBR

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

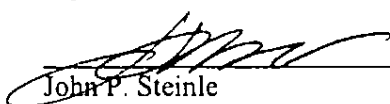
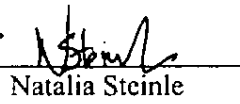
  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

**MEMBER APPOINTMENT**  
**OUTNUMBERED MARINE ADVENTURES, LLC**

Be it known that on the 7<sup>th</sup> day of September, 2018, John P. Steinle and Natalia Steinle Authorized Members of MARNICH II LLC are submitting this document to be recorded in the record Book of OUTNUMBERED MARINE ADVENTURES, LLC and states that as of this date, we hereby acknowledge and accept the appointment, on behalf of Marnich II LLC as Sole Member of OUTNUMBERED MARINE ADVENTURES, LLC and promise to carry out the duties and responsibilities of the Sole Member to the best of our ability.

Signed:

   
John P. Steinle                      Natalia Steinle

**ACKNOWLEDGMENT:**

State: Florida  
County: Palm Beach

On September 7<sup>th</sup>, 2018 John P. Steinle and Natalia Steinle appeared before me and acknowledged execution of this instrument in their stated capacity for the purpose therein contained.

  
NOTARY PUBLIC

(X) Personally known \_\_\_\_\_  
( ) Produced as Identification \_\_\_\_\_

MY COMMISSION EXPIRES April 25, 2021

