

L16000188079

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

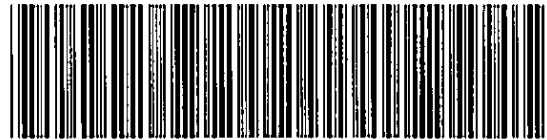
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

NNA (P15000086149)
Suffix

Office Use Only



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2022 JAN 24 PM 4:12

STATE OF NEW YORK

Amend/Name Change

FEB 1 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mermaid Charters
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:

Tammy Rich
Name of Person

Mermaid Charters, LLC
Firm/Company

4 McCoy Cir
Address

Key West FL 33040
City/State and Zip Code

mermaidcharterskeywest@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tammy Rich at (410) 320-5096
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2022 JAN 24 PM 4:12

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 JAN 24 PM 2:12

SECRETARY OF STATE
TALLAHASSEE, FL

September 2, 2021

TAMMY RICH
MERMAID CHARTERS
4 MCCOY CIR
KEY WEST, FL 33040

SUBJECT: MERMAID CHARTERS & MAINTENANCE L.L.C.
Ref. Number: L16000168079

We have received your document for MERMAID CHARTERS & MAINTENANCE L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P15000086149 (MERMAID CHARTERS INC).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 221A00021237

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Mermaid Charters & Maintenance L.L.C.

(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 01/17/2021 and assigned
Florida document number L 1600188079

This amendment is submitted to amend the following:

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

Mermaid Charters Key West LLC

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)

4 McCoy Cir

Key West FL 33040

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:

Same

New Registered Office Address:

Same

Enter Florida street address

Same

Florida

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.


Jimmy Greenfield
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

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Just removing Maintenance and adding

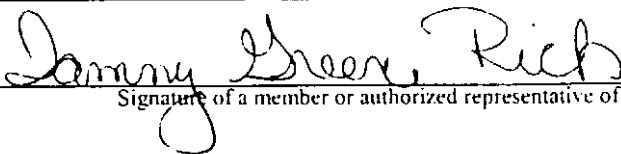
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated _____



Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00