

LL6 000 209674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

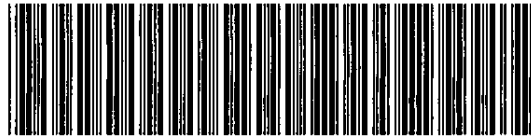
(Business Entity Name)

(Document Number)

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17 MAY 23 AM 7:36
CLERK OF COURT
HALL COUNTY, FLORIDA

MAY 23 2017

J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Biscayne Marine Partners
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:

Aabad Melwani
Name of Person
Atlas Marine Development
Firm/Company
3301 Rickenbacker Cswy
Address
Miami FL 33149
City/State and Zip Code
am@rmi.marina.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aabad Melwani at (305) 761-7720
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

Biscayne Marine Partners 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 11/16/2016 and assigned
Florida document number L16000209634

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida
City

17 MAY 23 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Aabadi Meluani</u>	<u>3301 Rickenbacker Cswy</u>	<input checked="" type="checkbox"/> Add
		<u>Key Biscayne FL</u>	<input checked="" type="checkbox"/> Remove
		<u>33149</u>	<input type="checkbox"/> Change
<u>AMBR</u>	<u>Diego Ardia</u>	<u>648 Brickell Ave</u>	<input type="checkbox"/> Add
		<u>Suite 1100</u>	<input checked="" type="checkbox"/> Remove
		<u>Miami FL 33131</u>	<input type="checkbox"/> Change
<u>AMBR</u>	<u>Damian Calabrese</u>	<u>3301 Rickenbacker Cswy</u>	<input type="checkbox"/> Add
		<u>Key Biscayne FL</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Atlas Marine Development LLC</u>		<input checked="" type="checkbox"/> Add
		<u>3301 Rickenbacker Cswy</u>	<input type="checkbox"/> Remove
		<u>Key Biscayne FL 33149</u>	<input type="checkbox"/> Change
<u>AMBR</u>	<u>Inzento International LLC</u>	<u>648 Brickell Ave</u>	<input checked="" type="checkbox"/> Add
		<u>Suite 1100</u>	<input type="checkbox"/> Remove
		<u>Miami FL 33131</u>	<input type="checkbox"/> Change
<u>AMBR</u>	<u>MOR Florida LLC</u>	<u>3301 Rickenbacker Cswy</u>	<input checked="" type="checkbox"/> Add
		<u>Key Biscayne FL</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 MAY 23 AM 7:36
SECRETARY OF STATE
ALL AMBASSY FL 010104

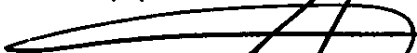
SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 17 MAY 23 BY 7:06

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 May 20, 2017.



Signature of a member or authorized representative of a member

Aabid R. Melwani

Typed or printed name of signee