L170000008133

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





400329392474

06/03/19--01031--004 **25.00

2019 2012-3 PH 1:16

Amend

JUN 1 4 2019

I ALBRITTON!

COVER LETTER ...

DIVI	ision of Cor TRI COUN	TY STEAMERS LLC		
SUBJECT:			ited Liability Company	···
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		ARMANDO NODA		
			Name of Person	
		ARM CONSULTING & C	CO INC	
			Firm/Company	
		3475 SHERIDAN ST SUI	TE 215F	
			Address	
		HOLLYWOOD, FL 3302	I	
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		ARMCONSULTING@YM	AIL.COM to be used for future annual report not	fication)
For further in	nformation c	oncerning this matter, please co		
ARMANDO		, , , , , , , , , , , , , , , , , , , ,	954 6238800	
		f Person	at (at () Daytin	ne Telephone Number
	, with the		7464 6562	ic receptions :
Enclosed is a	check for th	ne following amount:		
2 \$25.00 F	iling 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)
		ING ADDRESS:	STREET/COUR Registration Section	

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

TO:

Registration Section

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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

TRI COUNTY STEAMERS LLC

and assigned (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 $\frac{01/10/2017}{1}$ Florida document number L17000008133 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." 59 SW 3Rd Ave Enter new principal offices address, if applicable: Dania Beach, FL 33004 (Principal office address MUST BE A STREET ADDRESS) 59 SW 3Rd Ave Enter new mailing address, if applicable: Dania Beach, FL 33004 (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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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>	Address	Type of Action	
			Add	
			□ Remove	
			☐ Change	
		<u> </u>		
			□ Remove	
			Add	
			□ Remove	
			Change	
			Remove	
			Change	
			Add	
			Remove	
			Change	
				
			☐ Remove	
			□ Change	

(If an e <u>Note</u>	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	Gergely Molunes
	Signature of a member or authorized representative of a member
	$oldsymbol{\Theta}$
	MGR

Page 3 of 3

Filing Fee: \$25.00