L17 CCCC 35311

(Requestor's Name) (Address)	000334759060								
(City/State/Zip/Phone #)	64/109/12001026003 **25.00								
(Business Entity Name) (Document Number) Certified Copies Certificates of Status FRANCIS YACHT REPAIRS &	2828 APR 13 AM 8: 38 SECRETARY OF STATE TALLAHASSEE FLORID								
FRANCIS YACHT REPAIRS &S 22 NE 2ND TERRACE HALLANDALE BEACH FL 33009	ପର୍ଜ Mu								

Office Use Only

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APR 14 1000

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- FRANCIS VACH	REPAIRS AND SEXVICES LAC
(X Florida L.	Company as it now appears on our records.) imited Liability Company)
	npany were filed on 04/06/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	d liability company here:
Nox	4E
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the abble viction = L.C."
Enter new principal offices address, if applicable:	N/A SSET
(Principal office address MUST BE A STREET ADDRE	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	22 NE 2ND TERRACE HAKLANDALE BEACH FL, 33009
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>enter the name of the new regis</u> tere
Name of New Registered Agent: 22	CKSLEY ALOYSIUS FRAMCIS NE ZND TERRACE Emer Florida street address
New Registered Office Address: 222	MC LIAD IERRIA CE Enter Florida street address
HALL	ANDALE BEACH Florida 33009
New Registered Agent's Signature, if changing Registered a	Agent:
Thereby accept the appointment as registered agent an	nd agree to act in this capacity. I further agree to comply with the

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 Sign ture of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address Type of Action Add Remove Change Add Remove Add Remove SSET Dadd Remove Change AAA AAA Change AAA Change AAA Change AAA Change AAA Change AAA Change	
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Filing Fee: \$25.00