3/23/2017

Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone Fax Number : (323)962-8600 : (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Fmail	Address:			
CiliaTT	AUDITESS:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JAVELIN CHARTERING, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
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Help J. HARRIS

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## **COVER LETTER**

Division of C				
JAVELI SUBJECT:	N CHARTERING, LLC			
	Name of Lim	ited Liability Company	<del></del>	
The enclosed Articles of	of Amendment and fee(s) are sub	 mitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Cheyenne Moseley			
		Name of Person	40	
	Legalzoom.com, Inc.			
	Firm/Company 101 N. Brand Blvd., 11th Floor			
		Address		
	Glendale, CA 91203			
		City/State and Zip Code		
	gfpanayiotou@gmail.cor	n to be used for future annual report notif	(cation)	
For further information	concerning this matter, please c		•	
Cheyenne Moseley		800 7.73-0888 es	at. 9724	
Name	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for	the following amount:			
□ \$25.00 Filing Fee	S30.00 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

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Enter Florida street address	)
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## 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.

H Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

itle	Name	Address	Type of Actio
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Page 3 of 3

Filing Fee: \$25.00