## L1700005556

Office Use Only



500346814085

.07 (22.00 -- 01930~-623 | **\*\***25.69

RECEIVED

JUL 1 5 2020



D. BRUCE AUG 27 2020

## COVER LETTER

TO: Registration Se Division of Cor		* *	,	
MX Marine	, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Harris Glaser			
	-			
	MX Marine, LLC			
	<u> </u>	Firm/Company		_
	351 NE 185TH STREET			
		Address		<b>20</b> 2
	MIAMI, FL 33179			ZO JUI
		City/State and Zip Code	<del></del>	AAR [
	harris@midnightboats.com	to be used for future annual report notif	igntion)	
For further information of	oncerning this matter, please c		icationy	2020 JUL 15 AM 7:52 SEGRETACY OF STATE TALLAHASSEE, FL
Harris Glaser		954 745-8284 at ()		17E
Name o	f Person	Area Code Daytimo	: Telephone Numbe	er
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &
Mailing Addre		Street Address: Registration Sec	ction	
Registration Division of 0		Division of Cor		
P.O. Box 632	27	The Centre of T	allahassee	010
Tallahassee,	FL 32314	2415 N. Monro	c Street, Suite	810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MX Marine, LLC			
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Compan	ears on our records.) y)	
The Articles of Organization for this Limited I	Liability Company were filed on	03/09/2017 and assignc	ed
Florida document number L17000055556			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company	here:	
The new name must be distinguishable and contain the	words "Limited Liability Company." th	e designation "LLC" or the abbreviation "L	.,
Enter new principal offices address, if appli	cable:		, Alleger
(Principal office address MUST BE A STRE		- E - E - E - E - E - E - E - E - E - E	
		<u>&gt;</u> ∴ ഗ	i 
		後端 臺	<del>است.</del> از و ا
Enter new mailing address, if applicable:		<u>ئى</u> ـــــــ	
(Mailing address MAY BE A POST OFFICE	52 LE		
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our ess here:	records, enter the name of the new re-	gistered
Name of New Registered Agent:	Christopher R. Fertig		
New Registered Office Address:	200 SE 13th Street		
	Enter F	lorida street address	
	Fort Lauderdale	, Florida 33316	
	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.

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

Title	<u>Name</u>	Address	Type of Action
MGR	Richard Townsend	351 NE 185th St, Mia, F1 33179	□Add
			■Remove
			Remove
			Change
			□Add
			Remove
		<del></del>	□ Change
			□ Remove
			Change
			🗀 Add
			□Remove
<del></del>			
			□Remove
			□ Change

## Page 2 of 3

						. <u></u>		<u> </u>	
							•		
								:	
		<u> </u>							
			<del></del>	<u>,                                     </u>	<del>_</del>		· · · · · ·		
	<del></del>	<del></del> -	·			<del>_</del>		<del></del>	
		341,	· <del></del>	<del></del>	<del></del>		<del></del>	<del> </del>	
		·	<u>.                                    </u>				<del></del>		
,	<del></del>								
•							<u>-</u>		
•			- <u>-</u>				<del></del>		
•			<del></del>						
	·					· · · · · · · · · · · · · · · · · · ·	<u> </u>		
		<u></u>					<u> </u>	<del></del>	
_			_ <del></del> _					<del></del> -	
If an eff <u>Note:</u>	fective date is If the date i	other than the listed, the date mus nserted in this blue date on the D	t be specific a ock does not	nd cannot be pri	licable statute	ling or more than ory filing requi	(option: 90 days after fili rements, this da	nl) ng.) Pursuant to 605.02 ate will not be listed	:07 ( as ti
ne rec The	cord speci 90th day	fies a delayed after the rec	l effective ord is filed	date, but r i.	not an effe	ctive time, a	at 12:01 a.n	n. on the earlier	of:
Dated	July 8			2020					
		M		,					
		<del></del>	7			<del></del>			
			Signature of a	member or aut	horized repres	entative of a me	mber		

Page 3 of 3

Filing Fee: \$25.00