

L17000057332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100297550701

04/07/17--01003--006 **25.00

APR 10 2017
S. YOUNG

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
77 APR 17 PM 2:07

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Rainbow Yacht Charters, LLC

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:

Omar Pastrana

Name of Person

Firm/Company

425 NE 22nd St Apt 2401

Address

Miami, FL 33137

City/State and Zip Code

omar@paradisearchartersfl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Omar Pastrana

305

504-0421

at (_____) _____

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

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
17 APR 17 PM 2:07

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Rainbow Yacht Charters, 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 03/13/17 and assigned
Florida document number L17000057332.

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
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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Omar J. Pastrana Morales	425 NE 22nd St, Apt 2401	<input type="checkbox"/> Add
		Miami, FL 33137	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	David A. Siauvaud	425 NE 22nd St, Apt 2401	<input type="checkbox"/> Add
		Miami, FL 33137	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AP	Yancy Lopez	1940 Bay Drive Apt 2	<input type="checkbox"/> Add
		Miami Beach, FL 33137	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
11 APR 7 PM 2:01
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA

17 APR 1964

FILED
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
17 APR 17 PM 2:07

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 04/03, 17

[Handwritten signature]

Signature of a member or authorized representative of a member

Signature of a member or authorized representative

Imv. Paez

Typed or printed name of signee