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(Requestor's Name)
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(Document Number)
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#### **COVER LETTER**

	egistration Sec vision of Corp				
SUBJECT	patriot trees	lle			
SOBJECT		Name of Lim	ited Liability Company		
The enclose	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please retur	n all correspor	ndence concerning this matter	to the following:		
		trey walker dietz			
			Name of Person		
			Firm/Company		
		4713 theodore ave			
		sarasota florida 34233	Address	·	
			City/State and Zip Code	<del> </del>	<del></del>
		treydietz@rocketmail.com  E-mail address: (	to be used for future annual re	port notification)	<del> </del>
For further	information co	ncerning this matter, please co	all:		
trey dietz			941 7354 at ()		
	Name of	Person	Area Code	Daytime Telepho	ne 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 enclose		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

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

patriot trees lie	
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 117000058369	were filed on 05/22/2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Bay Walker Too charters lle	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5ara Sera, FL. 34233
(Principal office address MUST BE A STREET ADDRESS)	Sarasona, FL. 34233
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4713 theodore ave Sarasdafi 34233
3. If amending the registered agent and/or registered office angent and/or the new registered office address here:	iddress on our records, <u>enter the name of the new registe</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zip Code

#### 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 heing 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>	Address	Type of Action
mgr	trey w dietz	4713 theodore ave sarasota florida 34233	
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			□ Add
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e record The 90tl	specifies a delayed ef a day after the record	fective date, b is filed.	ut not an effecti	ive time, at 12:0	1 a.m. on the earli	ier of
	5 august	<u> </u>	134			
Dated	o acceptant	,				
Pated	- CICGUSI	1				
Dated	13	nature of a member of	or authorized represen	tative of a member		