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(Re	questor's Name)	
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(Requestor's Name) (Address) (City/State/Zip/Phone #) (PICK-UP WAIT M/ (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	MAIL	
(Bu	isiness Entity Nar	me)
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COVER LETTER

TO:

Registration Section

Division of Cor	porations				
Jolly Roger	Marine Restoration LLC				
SUBJECT:	Name of Lim	ited Liability Company			
	Name of Emi	ned manney Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Evan Basil				
			 		
	7 D D - M7 2 D -	Name of Person			
	Jolly Roger Marine Restor	ation LLC			
	-	Firm/Company			
	4 Admirals Walk				
	0 19 34007	Address			
	Stuart, FL. 34996				
		City/State and Zip Code			
	lcirruto@yahoo.com	·			
	E-mail address: (to be used for future annual report not	ification)		
For further information c	oncerning this matter, please ca	all;			
Evan Basil		772 2125057			
	<u>. </u>	at ()			
Name o	of Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee.		
L \$25.00 timig (cc	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)		
/					
MAIL	ING ADDRESS:	STREET/COUR	IER ADDRESS:		
	ration Section	Registration Section			
	on of Corporations	Division of Corporations			
	ox 6327 assee, FL 32314	Clifton Building 2661 Executive Center Circle			
i aliana	10000, F1, 32314 ,	Tallahassee, FL 3			
	<i></i>				

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

JOLLY ROGER MARINE RESTO			
(<u>Nume of the Lim</u>	ted Liability Compa (A Florida Limited)	iny as <mark>it now appears on our rec</mark> liability Company)	ords.)
The Articles of Organization for this Limited I Florida document number	iability Company	were filed on April 17 2017	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabí	lity Company," the designation "I	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		4 Admirals Walk	
(Principal office address MUST BE A STRE		Stuart, FL 34996	
	 -		2019 SEC
Enter new mailing address, if applicable:		4 Admirals Walk	JUL 2
(Mailing address MAY BE A POST OFFICE BOX)		Stuart, FL. 34996	9
B. If amending the registered agent and registered agent and/or the new registered of			ords, enter the name of the new
Name of New Registered Agent:			
New Registered Office Address:	4 Admirals Wal	lk	
	 -	Enter Florida street add	Iress
	Stuart		Florida 34996
		City	Zip Code

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, <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>	<u>Address</u>	Type of Action
AMBR	Lorraine Cirruto	4 Admirals Walk Stuart FL.34996	Add
			□ Remove
AMBR	Sandra Basil	110 SE Celestia Court PT. Saint Lucie, FL. 34983	
			Remove
			Change
			Remove
			☐ Change
			Add
			Remove
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ffecti	ive date, if othe fective date is listed	r than the dat	e of filing:	mpot be prior to	a date of tiling	or more than 90	(optional) days after filing.	Pursuant to 605.	0207
Note:	If the date insert	ed in this block	does not mee	et the applical	ble statutory	filing requirem	ents, this date	will not be liste	das
locum	ient's effective da	te on the Depar	Iment of Star	te s records.		٧.			
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Dated	7/22/2019		<u> </u>	3:44 p.m.	_ ·				
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Filing Fee: \$25.00