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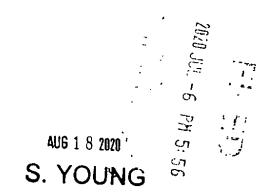
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(Address)
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COVER LETTER

Division o	of Corporations		
	nouse restaurant on the water lle		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articl	les of Amendment and fee(s) are sub-	mitted for filing.	
Please return ail cor	rrespondence concerning this matter	to the following:	
	david sonomoa		
		Name of Person	
	riverhouse restaurant on the	e water llc	
		Firm/Company	
	301 sw 3rd avenue		
		Address	
	ft lauderdate fla 33312		
		City/State and Zip Code	
	accounts@marinehospitality		
		o be used for future annual report noti	fication)
For further informa-	tion concerning this matter, please ca	all:	
james campbell		954 290 6115 at ()	
N.	lame of Person	Area Code Daytim	e Telephone Number
Enclosed is a check	for the following amount:		
□ \$25.00 Filing F	Fee	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing A</u> Registrat	ddress: tion Section	Street Address: Registration Sec	ction

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 ________ and assigned

Florida document number <u>4 17000 10 0428</u>.

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 "LLC" 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 new registerec agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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> Fitle</u>	<u>Name</u>	Address	Type of Action
mgr	james campbell	301 sw 3rd avenue ft laud fla 33312	■Add
			□ Remove
		<u>4</u>	□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			□ Change
			□Add
			□Remove
			□Change

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n effect ite: If	e date, if other than the date of filing:
ecord : is filed	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
ted	6-25-13020
	Signature of a member or authorized representative of a member
	Typed or printed name of signee