L17000102311

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates o	of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORID,

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COVER LETTER

STOCK SUBJECT:	ROCK CAFE, LLC.		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Richard C Welter		
		Name of Person	
	Sunset Watersports, Inc.		
		Firm/Company	
	6300 3rd Street		
		Address	
	Key West, FL 33040		
		City/State and Zip Code	
	sunsetwatersports@gmail.c	om to be used for future annual report notifi	igntion
For further information	concerning this matter, please e	•	Kattory
Paul S Mills, CPA		305 294-3699 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 Addr Registration		<u>Street Address:</u> Registration Sec	tion

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

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

STOCK ROCK CAFE, 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 05/08/2017 and assigned Florida document number L17000102311 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: COW KEY RESTAURANT, LLC. 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 registered 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>Title</u>	<u>Name</u>	Address	Type of Acti	
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ective date, if other than the date of filing:	:	2711	(opti	onal)		
effective date is listed, the date must be specific and c te: If the date inserted in this block does not me	eet the applicable					
ument's effective date on the Department of Sto	ate's records.					
cord specifies a delayed effective date, but not a	an effective time,	at 12:01 a,m. on	the earlier of: (b) The 9	0th day	after th
s filed.						
ed March 9,	2020					
ed March 9, Robard @ 1	With					
Signature of a mo	ember or authorize	d representative of	a member			-