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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone #	<i>f</i>)
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JUN 0 2 2018

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Nava	re KayaK Name of Limi	FISHING ted Liability Company	
The enclosed Articles of A	amendment and fee(s) are subt	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	Nicholas	Name of Person	
		Name of Person	
	Navarre K	CYCK FISHIN	<u> </u>
		Firm/Company	J
	8248 Monta	lbar Street	
		Address	
	Navarre F	City/State and Zip Code	<u>-</u>
	E-mail address: (1	arrenayak fishi	my Cem
For further information co	ncerning this matter, please ca	ail:	
Nicholas	Lytle	at ($\hat{\mathcal{E}}$ $\hat{\mathcal{S}}$ $\hat{\mathcal{O}}$) 2.0 Area Code Day	94-3957
Name of	reison	Area Code Day	unie reiepnone Number
Enclosed is a check for the	e 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

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

NAVAVYE KAYAK FISH (Name of the Limited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.) Company)			
he Articles of Organization for this Limited Liability Company were fil	ed on <u>05 22 2</u>	017 a	nd assig	ned
lorida document number <u>L\7000 (1253\</u> .				
his amendment is submitted to amend the following:				
a. If amending name, enter the new name of the limited liability con	npany here:			
KAYAK FISHING Florida, LI he new name must be distinguishable and contain the words "Limited Liability Comp	LC			
he new name must be distinguishable and contain the words "Limited Liability Comp	any," the designation "LLC" or	r the abbrevia	tion "L.L.C	C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)	NA			
		<u>}*</u> ;	2018	
Enter new mailing address, if applicable:		<u> </u>	ک	
Mailing address MAY BE A POST OFFICE BOX)	414] () () () () () () () () () (7: 	,
		H -	ω	1-1-
		20	7.	1
3. If amending the registered agent and/or registered office ad	dress on our records,	enter the r	ame of	the no
egistered agent and/or the new registered office address here:		E	20	
Name of New Registered Agent:	NIA			
New Registered Office Address:	N A Enter Florida street address			
	Enter Florida street address			_
	, Flori	dа		
City		Zip	Code	
lew Registered Agent's Signature, if changing Registered Agent:				

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.

- H	
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>	Address	Type of Action
	M14		□ Add
			Remove
			Change
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			Remove
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	specifies a delay			e, but no	t an effec	tive time, a	at 12:01 a	a.m. on the	earlier
he 90t	n day after the r	ecord is fi	led.						
ted	June 25			2018					
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Filing Fee: \$25.00