

**L/7000120766**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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17 SEP 19 AM 8:49  
CLERK OF COURT  
ADAMS COUNTY, FLORIDA

SEP 20 2017

Y GULKER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Secret Island LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cindy B Bohn

\_\_\_\_\_  
Name of Person

Swindell Bohn Durden & Phillips PL

\_\_\_\_\_  
Firm/Company

3560 South Third Street

\_\_\_\_\_  
Address

Jacksonville Beach, FL 32250

\_\_\_\_\_  
City/State and Zip Code

cbohn@beachcpafirm.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cindy B. Bohn

904 241-8176  
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 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**

Secret Island, 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 June 2, 2017 and assigned  
Florida document number L17000120766.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Pablo Beach Trading Company, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

\_\_\_\_\_, Florida

\_\_\_\_\_  
Zip Code

**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>	<u>Address</u>	<u>Type of Action</u>
MGR	Eric J. Bohn	3948 Third Street South PMB #40	<input type="checkbox"/> Add
		Jacksonville Beach, FL 32250	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mike Sneed	220 Myra Street	<input type="checkbox"/> Add
		Neptune Beach, FL 32266	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Duval Development, LLC	220 Myra Street	<input checked="" type="checkbox"/> Add
		Neptune Beach, FL 32266	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SEP 9 8:43  
FLORIDA  
AMBR

17 SEP 10 AM 8:00  
OFFICE OF THE  
ATTORNEY GENERAL  
STATE OF MISSISSIPPI

17 SEP 60 AM 8:49  
FBI WASH DC  
FBI NEW YORK

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated 14 SEP 17, 2017

representative of a member

Signature of a member or authorized representative of a member

Timothy J. Kline  
Typed or printed name of signatory

Typed or printed name of signee