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## **COVER LETTER**

TO:

Registration Section

Division of Cor	porations									
	Vatersports, LLC									
SUBJECT: Name of Limited Liability Company										
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing								
		-								
Please return all correspo	ondence concerning this matter	to the following:								
	Adam E. Fischer									
		Name of Person								
	ANO Florida, LLC									
	<del></del>	Firm/Company								
	PO Box 4704									
		Address	<del> </del>							
	Fort Walton Beach, FL 32	549								
		City/State and Zip Code								
	anomaterial@yahoo.com									
		to be used for future annual report no	tification)							
For further information c	oncerning this matter, please c	all:								
Adam E. Fischer		352 226-4070								
Name o	î Person	at () Area Code Daytin	me Telephone Number							
Enclosed is a check for the	ne 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		Street Address: Registration Se	ection							
Division of C	•	Division of Corporations The Centre of Tallahassee								
P.O. Box 632 Tallahassee. 1			oe Street. Suite 810							

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Okaloosa Watersports, LLC				
( <u>Name of the Limited I</u> (A f	<u>.iability Compar</u> Florida Limited I.	iv as it now appears on ou iability Company)	r records.)	_
The Articles of Organization for this Limited Liabi	lity Company	were filed on <u>07/13/17</u>	and	l assigned
Plorida document number L17000150155				
This amendment is submitted to amend the following	ng:			
A. If amending name, <u>enter the new name of th</u>	e limited liabi	lity company here:		
New name: ANO Florida, LLC			48 48	2020
The new name must be distinguishable and contain the words	s "Limited Liabili	ty Company," the designation	on "LLC" or the above lation	L.C."
Enter new principal offices address, if applicable	e:	No change	<u> </u>	7
Principal office address MUST BE A STREET A	(DDRESS)		<u></u>	
				<u> </u>
Enter new mailing address, if applicable:		No change		35
Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>			
B. If amending the registered agent and/or regis		ddress on our records	. <u>enter the name of the</u>	new registere
Name of New Registered Agent:	No change			
New Registered Office Address:	No change			
		Enter Florida stred	et address	
<u>-</u>			Florida	
		City	Zip Co	ode

## 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 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
	No change	No change	□Add
		<del></del>	□ Remove
		<u> </u>	Change
			Re Capve
			To w U
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// ////////	Signature of a member or authorized representative of a member			11/	lle-	/	[w	-2/	_				2M			

Typed or printed name of signee