L17000201200

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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91 SET - 7 PH 3: 1

COVER LETTER

TO:	Registration S Division of Co		,	
SUBJE		CUBA TECH LATIN AMERICA	A LLC	·
SUBJE.	C1;	Name of Lim	ited Liability Company	
		of Amendment and fee(s) are sub condence concerning this matter		
		Kristine M. Chapman, Esq	nire	
			Name of Person	
		Law Offices of Kristine M	. Chapman	
			Firm/Company	
		2500 N. Military Trail, Su	ite 240	
			Address	
		Boca Raton, FL 33431		
			City/State and Zip Code	
		soltech@tgidiving.com	to be used for future annual report nou	fication)
For furt	her information	concerning this matter, please co	·	
Kristin	e M. Chapman,	Esquire	561 989-8885	
	Name	of Person	at ()	e Telephone Number
Enclose	d is a check for	the following amount		
■ \$25	5,00 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		Street Address: Registration So	antina.

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

21 SEP -7 PH 3: 17

If Changing Registered Agent, Signature of New Registered Agent

S.O. L. Scuba Tech Latin America 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 09/28/2017 and assigned
Florida document number L17000201200
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 "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
Cuv Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:
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

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



21 SEP -7 PM 3: 17

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	LAZZARI, SERGIO	2617 Frederick Boulevard	□Add
		Delray Beach, FL 33483	■Remove
			☐Change
MGR	PEZZOLI, OLIVER	2617 Frederick Boulevard	□Add
		Delray Beach, Fl. 33483	≅ Remove
			□Change
			□Add
			Remove
			□ Change
		4.	□Add
			□ Remove
			□Add
			□Remove
			□Change
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data of filling or more than	(optional)	Dumunu to 605 0307
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zed representative of a n	iember	
	o date of filing or more that ble statutory filing require, at 12:01 a.m. on the file of a more described as a second of a more described of a mor	(optional) o date of filing or more than 90 days after filing.) ble statutory filing requirements, this date v the, at 12:01 a.m. on the earlier of (b). The

Filing Fee: \$25.00