## L17000 230013

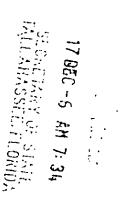
(Requestor's Name)	
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PICK-UP WAIT MAIL	
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(Business Entity Name)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	٦





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## **COVER LETTER**

ro: Registration Sc Division of Cor			
THE LEAST.	OKER SUPPLY LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Ben Beman		
		Name of Person	
	Nautihooker Supply LLC		
		Firm/Company	<del>,</del>
	1201 38th Street W		
		Address	
	Bradenton, FL 34205		
		City/State and Zip Code	
	fldiver4u@gmail.com E-mail address: (	to be used for future annual report notif	ication)
For further information of	oncerning this matter, please c	·	
Claire P Witting EA		941 776-1502 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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:

TO:

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

## NAUTIHOOKER SUPPLY 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 I	iability Company were filed on 11/07/20	and assigned
Florida document number L17000230013		
This amendment is submitted to amend the fol	lowing:	
A. If amending name, <u>enter the new name o</u>	of the limited liability company here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	<del> </del>
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and		records, enter: the name of the new
registered agent and/or the new registered of	office address nere:	17/
Name of New Registered Agent:	Benjamin G Beman	PEC -
New Registered Office Address:		87 0 A
	Enter Florida st	9.7
	City	Florida Sup Code
	Chy	is no cone

lew 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 rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is sing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability impany 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 Action
AMBR	Benjamin G Beman		□ Add
			Remove
			■ Change
			Remove
			☐ Change
			Add
			□ Remove
		<del> </del>	Change
			Add
			□ Remove
		<del></del>	Change
			Remove
			□ Change
<del></del>	<del> </del>		Add
			☐ Remove
			□ Change

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	ys after filing.) Pursuant to 605.0
ocument's effective date on the Department of State's records.	ns, ons date will not be listed
record specifies a delayed effective date, but not an effective time, at 12. The 90th day after the record is filed.	::01 a.m. on the earlie
November 30 2017	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00