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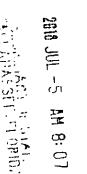
(R€	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Se Division of Cor			
BARRING SUBJECT:	TON BOAT PRINERS LLC		
SUBJECT:	Name of Lin	nited Liability Company	/ /
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	JENNIFER SCHUMACH	ER	
		Name of Person	
	KELLEHER & BUCKLE	Y, LLC	t notification)
		Firm/Company	
	102 S. WYNSTONE PAR	Firm/Company STONE PARK DRIVE	
		Address	
	NORTH BARRINGTON,	IL 60010	
		City/State and Zip Code	
	JSCHUMACHER@KELLI		
	E-mail address: (to be used for future annual report notifi	ication)
For further information co	ncerning this matter, please co	ali:	
JENNIFER SCHUMACH	HER	847 382-9130 at ()	
Name of	Person	at () Area Code Daytime	Telephone 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

any as it now appears on our records.) Liability Company)		
were filed on NOVEMBER 27, 2017	and a	ssigned
oility company here:		
lity Company," the designation "LLC" or the	abbreviation "	L.L.C."
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		elity Company," the designation "LLC" or the abbreviation "

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 = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			□ Remove
			□ Change
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Page 3 of 3

Filing Fee: \$25.00