L180000/0207

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COVER LETTER

Tallahassee, FL 32314

TO:	Registration Se Division of Cor			
oun in		rine Electric LLC	•	
SUBJEC	UT:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Warren Stephen Foote		
			Name of Person	
		Harbor Marine Electric		
			Firm/Company	
		1020 Margaret St., #101		
		-	Address	
		Key West, Florida 33040		
			City/State and Zip Code	
		steve@harbormarine.us		
		E-mail address: (to be used for future annual report r	iotification)
For furth	ner information o	concerning this matter, please c	all:	
Steve Fo	oote		954 595 7252	
	Name o	of Person	at () Area Code Day	time Telephone Number
Enclosed	d 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 Addre		Street Address: Registration	
	Division of C	Corporations	Division of C	Corporations
	P.O. Box 633	7	The Centre o	f Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Harbor Marine Electric LLC	دادسال ۱۱ ۱۱ و ۱	<u>35 </u>
(Name of the Limited Liability Con (A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on January 11, 2018	and assigned
Florida document number L18000010207		
TOTICA GOCULTANIC HUMOCI		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or th	e 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)		
Maning duaress with DE ATTOM COLLINST		
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our records, <u>enter the n</u>	ame of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	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 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 130 13 FM St 35	Type of Action
AMBR	Tyrone Mario Chatman	401 Balido St.	■Add
		Key West, Florida 33040	Remove
			□Change
			□Add
			Remove
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ocument's effective date on the	Department of State's records.			
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l is filed.	ave date, but not an encouve this	e, at 12.01 a.m. on the	carnet or. (b) The soul day a	inci nic
ated October 7	2020	<u>.</u> •		
/ Y	Till -			
/ / / ~				

Filing Fee: \$25.00

Typed or printed name of signee