

LIB0000 16761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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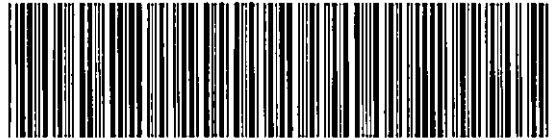
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
18 JUL 13 AM 8:31

N COOPER  
JUL 17 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ROCKIT CONTROLS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lee P. Bennett  
Name of Person

Rockit Controls LLC  
Firm/Company

PO Box 540623  
Address

Merritt Island FL, 32954  
City/State and Zip Code

lee.bennett@stream-surfer.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lee P Bennett at (321) 710-7816  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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**

ROCKIT CONTROLS, 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 January 18, 2018 and assigned  
Florida document number L18000016761.

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)

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**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*

*City*

*Florida*

*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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CAIN, NICHOLAS	73 THE LAUND	<input checked="" type="checkbox"/> Add
		LEYLAND, LANCASHIRE	<input type="checkbox"/> Remove
		UK PR26-7XY	<input type="checkbox"/> Change
MGR	PRETLOW, DONALD M.	309 N. ROUNDTREE DRIVE	<input checked="" type="checkbox"/> Add
		COCOA, FL 32926	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BENNETT, LEE P.	3265 SAVANNAHS TRAIL	<input checked="" type="checkbox"/> Add
		MERRITT ISLAND, FL 32953	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	REISCHMANN, MICHAEL J.	1895 IRMA ROAD	<input checked="" type="checkbox"/> Add
		EUSTIS, FL 32726	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	MARTINDALE, ZACHARY B.	2402 PALMETTO STREET	<input checked="" type="checkbox"/> Add
		NOKOMIS, FL 34275	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ELITE YACHT SOLUTIONS LLC	309 N. ROUNDTREE DRIVE	<input type="checkbox"/> Add
		COCOA, FL 32926	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DEMOPAD SOFTWARE, LTD.	73 THE LAUND	<input type="checkbox"/> Add
		LEYLAND LANCASHIRE,	<input checked="" type="checkbox"/> Remove
		UK PR26-7XY	<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: JANUARY 18, 2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)


**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated JULY 12 2018

LY 12 \_\_\_\_\_ 2018



\_\_\_\_\_  
Signature of a member or authorized representative of a member

MICHAEL REISCHMANN

Typed or printed name of signee