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\overline{\pi}	FILING	Amend
	FILING Nayles Cruíse (CORPORATE NAME AND DOCUMENT	Line, LLC
•	(CORPORATE NAME AND DOCUMENT	
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Naples Cruise Line, LLC				
(Name of the Limited Liability Compa (A Florida Lamited I	ny as it now appears on our records.) iability Company)			
e Articles of Organization for this Limited Liability Company were filed on 63 01 2018 and assigned orida document number 1.18000055282				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab		136 136 136 136 136 136 136 136 136 136		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "I I C" o	or the Arpreviation 1.1 F-		
Enter new principal offices address, if applicable:	405 Fifth Avenue South, Suite 6	See on		
(Principal office address MUST BE A STREET ADDRESS)	Naples, PL 34102			
		STATE OF		
Enter new mailing address, if applicable:	405 Firth Avenue South, Suite 6			
(Mailing address MAY BE A POST OFFICE BOX)	Naples, Fl. 34102			
		until the name of the na		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	flice address on our records. e:	enter the name of the ne		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	. Flor	rida _		
	Сиу	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 filled 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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	David Hoffmann	405 Fifth Avenue South, Suite 6	O Add
		Naples, Ft. 34102	□ Remove
			☐ Change
MGR	Grey Hoffmann	825 Green Bay Rd., Suite 100	☐ Add
		Wilmette, H, 60091	■ Remove
			□ Change
MGR	Richard J. Rinella	405 Fifth Avenue South, Suite 6	blA ■
		Naples, FL 34102	Remove 7
			Ada Ada
			ラロ 3 P Remove
			☐ Change
			□ Aad
			☐ Remove
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	ation, enter change(s) here: (Attach add	
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Effective date, if other than the liften effective date is listed, the date in Note: If the date inserted in this document's effective date on the	PIOCK GOGS HOT INCEL THE abblicacie system.	(optional) gor more than 90 days after filing a Pursuant to 1915,020 filing requirements, this date will not be listed a
he record specifies a delay The 90th day after the re	ed effective date, but not an effect ecord is filed.	ive time, at 12:01 a.m. on the earlier (
Dated March 28	2018	
LARICG	120000000000000000000000000000000000000	- (39
	Signature of a member of authorized representation	.:
	Signature of a member of aumorized represen-	man e or a mem

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