

L18000079007

VW

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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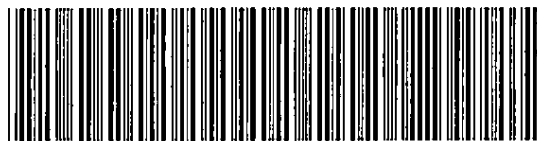
(Business Entity Name)

(Document Number)

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2024 JAN 23 PM 6:02
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DAY BOAT MARINE SERVICES 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:

Pier S. Bjorklund

Name of Person

Blue Catch Fleet Group Inc.

Firm/Company

222 Lakeview Avenue, Suite 800

Address

West Palm Beach, Florida 33401

City/State and Zip Code

advisor@birchfirst.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pier S. Bjorklund

at (561) 379-1220

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DAY BOAT MARINE SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

10/23/2019

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number L18000079007

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ISLAND CATCH MARINE SERVICES LLC

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)

C/O Blue Catch Fleet Group Inc.

222 Lakeview Avenue, Suite 800

West Palm Beach, Florida 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

C/O Blue Catch Fleet Group Inc.

222 Lakeview Avenue, Suite 800

West Palm Beach, Florida 33401

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

_____, 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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Howard M. Bubis	1335 Old Dixie Hwy., #16	<input type="checkbox"/> Add
		Lake Park, Florida 33403	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Pier S. Bjorklund	C/O Blue Catch Fleet Group Inc.	<input checked="" type="checkbox"/> Add
		222 Lakeview Avenue, Suite 800	<input type="checkbox"/> Remove
		West Palm Beach, Florida 33401	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(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.

Dated January 19, 2024

Pier S. Bjorklund

Typed or printed name of signee