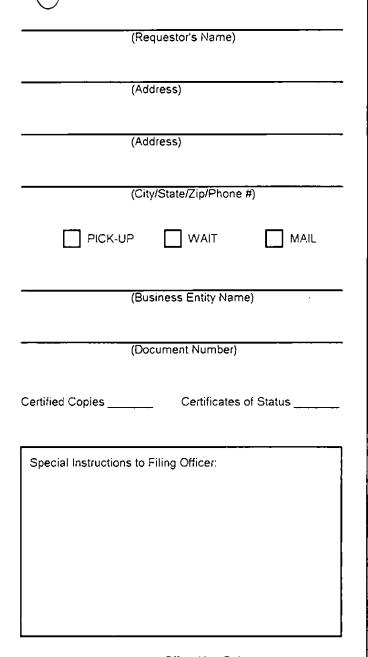
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Office Use Only



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FILED

COVER LETTER

SUBJECT:	DAY BOAT	FLEET ASSETS LLC	•		
SUBJECT.	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Pier S. Bjorklund				
Name of Person					
	Blue Catch Fleet Group Inc	<u>:</u> .			
	Firm/Company				
222 Lakeview Avenue, Suite 800					
		Address			
	West Palm Beach, Florida	3340]			
	City/State and Zip Code advisor@birchfirst.com				
	E-mail address: (to be used for future annual report notifi	eation)		
For further information c	oncerning this matter, please ca	all:			
Pier S. Bjorklund at (561) 379-1220 Name of Person Area Code Douting Telephone Number					
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	ne 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 Addres	587	Street Address:			

Registration Section
Division of Corporations

P.O. Box 6327

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

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

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DAY BOAT FLEET ASSETS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 03/28/2018 The Articles of Organization for this Limited Liability Company were filed on ____ and assigned 1.18000079012 Florida document number ___ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ISLAND CATCH FLEET ASSETS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." C/O Blue Catch Fleet Group Inc. Enter new principal offices address, if applicable: 222 Lakeview Avenue, Suite 800 (Principal office address MUST BE A STREET ADDRESS) West Palm Beach, Florida 33401 C/O Blue Catch Fleet Group Inc. Enter new mailing address, if applicable: 222 Lakeview Avenue, Suite 800 (Mailing address MAY BE A POST OFFICE BOX) 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_, Florida ___

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>	Type of Action
MGR	Howard M. Bubis	1335 OLD DIXIE HWY., #16	
··· =			□Add
		Lake Park, Florida 33403	
			≣Remove
			Change
MGR	Pier S. Bjorklund	C/O Blue Catch Fleet Group Inc.	
			∃ Add
		222 Lakeview Avenue, Suite 800	
			Петюve
		West Palm Beach, Florida 33401	
			□Change
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: ________ (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. January 19 2024 Dated

Signature of a member or authorized representative of a member

Pier S. Bjorklund

Typed or printed name of signee