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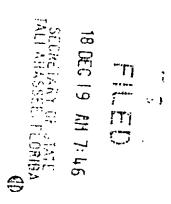
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COVER LETTER

	Registration Se Division of Cor			
SUBJEC	Bluewater l	Docks & Marine, LLC		
SOBJEC	1.	Name of Lim	sited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please reti	urn all correspo	ndence concerning this matter	to the following:	
		Dale T. Gobel, Mgr. & Re	gistered Agent	
			Name of Person	
		Bluewater Docks & Marin	e, LLC	
			Firm/Company	
189 S. Orange Ave., Suite 1430				
			Address	
		Orlando, FL 32801		
			City/State and Zip Code	
		dgobel@gobelflakes.com		
		E-mail address: (to be used for future annual report notif	ication)
For furthe	r information c	oncerning this matter, please co	all:	
Dale T. G	obel		407 455-5165	
	Name o	Person		Telephone Number
Enclosed i	is a check for th	e 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:

TO:

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

Bluewater Docks & Marine, LLC			
(Name of the Lim	ited Liability Cor (A Florida Limi	mpany as it now appears on our reco led Liability Company)	ords.)
The Articles of Organization for this Limited Elorida document number L18000221422	Liability Compa	any were filed on 09/18/2018	and assigned
his amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited I	iability company here:	
N/A			
he new name must be distinguishable and contain the	words "Limited L	iability Company," the designation "L	.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A	<u></u>
Principal office address MUST BE A STREET ADDRESS))	18
			E C
			23 5
Enter new mailing address, if applicable:		N/A	Te z m
(Mailing address MAY BE A POST OFFICE BOX)			
			RES 6
		· · · · · · · · · · · · · · · · · · ·	6
 If amending the registered agent and egistered agent and/or the new registered of the new registered agent and new registered of the new registered agent and new registered of the new registered of the new registered of the new registered agent and new registered of the new registered agent and new registered agent and new registered agent and new registered agent agen	l/or registered office address l	l office address on our reco <u>nere</u> :	rds, <u>enter the name of the</u>
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida street add	lress
			Florida
		City	Zin 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>	Address	Type of Action
Mgr	Harold Thompson	189 S. Orange Ave., Ste. 1430 Orlando, FL 32801	∃ Add
			□ Remove
			☐ Change
			□ Add
			Remove
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Effective date, if other than the fan effective date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the De	t be specific and cannot be prior took does not meet the applica	o date of filing or more th ble statutory filing req	(optional) an 90 days after filing.) Pursua uirements, this date will no	int to 605.0207 it be listed as
ne record specifies a delayed The 90th day after the reco	effective date, but not ord is filed.	an effective time	, at 12:01 a.m. on the	e earlier of
Dated December 16	2018	-11		
	\/\/	1	1	
		ized representative of a	<u>/</u>	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00