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| (Re                     | questor's Name)    |           |
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| (Cit                    | ry/State/Zip/Phone | : #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | siness Entity Nam  | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
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## **COVER LETTER**

| Divi                 | sion of Corp  | oorations                                       |   |   |
|----------------------|---------------|---|---|---|
| ATTENDED ATTEND      | Nova Yacht    | Management LLC                                  |   |   |
| SUBJECT:             |               | Name of Lim                                     | ited Liability Company  |   |
| The enclosed         | Articles of A | Amendment and fee(s) are sub                    | mitted for filing.  |   |
| Please return        | all correspor | ndence concerning this matter                   | to the following:   |   |
|                      |               | Gregory Wessel                                  |   |   |
|                      |               |   | Name of Person  |   |
|                      |               | 2200 Bern Creek Loop                            | Firm/Company  |   |
|                      |               | 2200 Belli Cleek Loop                           |   |   |
|                      |               | Sarasota, Florida 34240                         | Address   |   |
|                      |               | Gregory.Wessel@gmail.cor                        | City/State and Zip Code   |   |
|                      |               | E-mail address: (                               | to be used for future annual report notific                         | ation)  |
| For further in       | formation co  | ncerning this matter, please ca                 | all:  |   |
| Greg Wessel          |               |   | 941 735-6360<br>at ()   |   |
|                      | Name of       | Person  | Area Code Daytime T   | Celephone Number  |
| Enclosed is a        | check for the | e following amount:                             |   |   |
| <b>■ \$</b> 25.00 Fi | ling Fee      | ☐ \$30.00 Filing Fee &<br>Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |

MAILING ADDRESS: Registration Section Division of Corporations

TO:

**Registration Section** 

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



| Nova Yacht Management LLC   |  | PLORIDA                  |
|---|--|--------------------------|
| (Name of the Limited Liabil<br>(A Florid                                      | lity Company as it now appears on our records.)<br>la Limited Liability Company) |                          |
| he Articles of Organization for this Limited Liability (orida document number | Company were filed on October 8, 2018  | and assigned             |
| is amendment is submitted to amend the following:                             |  |                          |
| If amending name, enter the new name of the lim                               | nited liability company here:  |                          |
| e new name must be distinguishable and contain the words "Lir                 | nited Liability Company," the designation "LLC" or t                             | he abbreviation "L.L.C." |
| iter new principal offices address, if applicable:                            |  |                          |
| rincipal office address MUST BE A STREET ADD                                  | RESS)  |                          |
|   |  |                          |
|   |  |                          |
| iter new mailing address, if applicable:                                      |  |                          |
| ailing address MAY BE A POST OFFICE BOX)                                      |  |                          |
|   |  |                          |
| If amending the registered agent and/or regis                                 |  | ter the name of the r    |
| gistered agent and/or the new registered office ado                           | dress 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

| <u>Title</u> | <u>Name</u>         | Address              | Type of Action |
|--------------|---------------------|----------------------|----------------|
|              | Rachel Laine Whynot | 2200 Bern Creek Loop | <u></u>        |
| MGR          |                     |                      |                |
|              |                     | Sarasota, FL 34240   |                |
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|  | October 18, 2018   |   |
| Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the Defective date on the Defective date. | date of filing:  | .)<br>g.) Pursuant to 605.0207 (3)(b<br>e will not be listed as the |
| the record specifies a delayed<br>The 90th day after the rec   | effective date, but not an effective time, at 12:01 a.m. ord is filed. | , on the earlier of:  |
| October 18 Dated   | 2018   |   |
|  | Greg Wessel  |   |
|  | Signature of a member or authorized representative of a member         |   |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00