(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	TIAW [	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

TO:	Registration Se Division of Cor			
CUDIC	Cruise Ape	ex, LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Francisco Salazar		
			Name of Person	
		792 NE 193rd Terrace	Firm/Company	
		Miami, FL 33179	Address	
		alekatsea@gmail.com	City/State and Zip Code	***************************************
		E-mail address: (	to be used for future annual report notif	ication)
For furt	her information co	oncerning this matter, please co	atl:	
Francis	sco Salazar	***	407 760-5804 at () Area Code Daytime	77.
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	d 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)

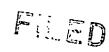
MAILING ADDRESS:

• 1

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



Cruise Apex, LLC

2019 FEB 26 PM 2: 38

iv as it now appears on our records.) iability Company) TATT	· ~ ~
iability Company)  TALL  November 20th, 2018	-
were filed on November 2001, 2010	and assigned
lity company here:	
ty Company," the designation "LLC" or the abbrevi	ation "L.IC."
	·
	name of the n
Enter Florida street address	
. Florida	
City Z	ip Code
i	Movember 20th, 2018  Ility company here:  ity Company," the designation "LLC" or the abbrevi  fice address on our records, enter the  Enter Florida street address  , Florida

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</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager

AMBR =	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
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E. Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applica	o date of filing or more than 90 da ble statutory filing requiremen	( <b>optional)</b> ys after filing.) Pursuant to 605.0207 nts, this date will not be listed as
f the record specifies a delayed b) The 90th day after the reco		an effective time, at 12	2:01 a.m. on the earlier of
February 22nd	2019		
	In.	<b>_</b> :	
	Signature of member or author	·	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00