

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L1900005282

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HOROSCOPE WATER, LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

JUN 15 2022

K. Brumbley

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOROSCOPE WATER, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 01/08/2019 and assigned
Florida document number 119000005282.

This amendment is submitted to amend the following:

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

BLACK SEA FISH MARKET 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)

710 WC OWEN AVE

UNIT 101

CLEWISTON, FL 33440

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

710 WC OWEN AVE

UNIT 101

CLEWISTON, FL 33440

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:

CHANGE OF ADDRESS

New Registered Office Address:

710 WC OWEN AVE., UNIT 101

Enter Florida street address

CLEWISTON

Florida

33440

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

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 AND

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>
AMBR	CHANGE OF ADDRESS	710 WC OWEN AVE	<input type="checkbox"/> Add
		UNIT 101	<input type="checkbox"/> Remove
		CLEWISTON, FL 33440	<input checked="" type="checkbox"/> Change
AMBR	CHANGE OF ADDRESS	710 WC OWEN AVE	<input type="checkbox"/> Add
		UNIT 101	<input type="checkbox"/> Remove
		CLEWISTON, FL 33440	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

ADD EIN: 33-3072188

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.

Dated JUNE 14

2022

Signature of a member or authorized representative of a member

ROBERTO CASTILLO

Typed or printed name of signer