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COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: Captain Jack 140@ CMair, Com Luc Name of Limited Liability Company |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| John La Plante Name of Person |
| Captain Jack Boat Tours Firm/Company |
| POB01122 Address |
| Captainjack 14D@ amail. com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| John La Plante at (239) 222-9880 Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: \$\sum_{25.00}\$ \text{Filing Fee} \text{\$30.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$25.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$25.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$25.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$25.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$25.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$25.00 Filing Fee, Certified Copy (additional copy is enclosed)} \qqq \qqq \qqq \qqq \qqq \qqq \qqq \q |
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MAILING ADDRESS:

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**

FILED

| (Name of the Limited Liability Cor (A Florida Limit | ALL. COW LLC mpany as it now appears on our records. ted Liability Company) ZUIJ JUL 15 P 2 10 | |
|--|---|--|
| The Articles of Organization for this Limited Liability Comparing the Comparing Compar | any were filed on Why 18 2019 and assigned | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited I | iability company here: | |
| Captain Jack Boat Tour The new name must be distinguishable and contain the words "Limited L | S LLC inhility Company "the decignation "I I C" or the abbreviation "I I C" | |
| | | |
| Enter new principal offices address, if applicable: | 2735 Geary St Matlacha FL 33993 | |
| (Principal office address MUST BE A STREET ADDRESS | Matlacha FL 33493 | |
| | | |
| Enter new mailing address, if applicable: | PO BOX 122 | |
| (Mailing address MAY BE A POST OFFICE BOX) | PO Box 122 Matlacha FL 33993 | |
| | | |
| registered agent and/or the new registered office address | t office address on our records, enter the name of the here: | |
| Name of New Registered Agent: | here: | |
| Name of New Registered Agent: | here: | |
| Name of New Registered Agent: New Registered Office Address: 27 | 35 GCan St Enter Florida street address | |
| Name of New Registered Agent: New Registered Office Address: 27 | here: | |

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 = M AMBR = A | lanager .uthorized Member | | |
|---------------------|------------------------------|---------|----------------|
| <u>Title</u> | Name | Address | Type of Action |
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| (If an effecti <u>Note:</u> If t | date, if other than the date of filing: |
| | d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 0th day after the record is filed. |
| Dated | July 6 2019. |
| | Y John Ja Phate Signature of a member or authorized representative of a member |
| | |

Page 3 of 3

Filing Fee: \$25.00