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☐ PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
	ocument Number)	
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Certified Copies	_ Certificates	of Status
Consist Instructions to	Cilina Officer	
Special Instructions to	Filing Officer.	





05/05/21--01012--006 **25,00



COVER LETTER

	stration Secti ion of Corpo				
SUBJECT:	KINGS Y	ACHT MIAMI LLC			•
3003EC1			nited Liability Company		
		nendment and fee(s) are sul	_		
Please return a	H correspond	ence concerning this matter	to the following:		
			KUTAY SATIROGLU		
			Name of Person		
		K	NGS YACHT MIAMI LLC		
			Firm/Company		
		54	45 COLLINS AVE CU-10		
			Address		
		MIAN	MI BEACH, FLORIDA 33140 City/State and Zip Code		
		HARO	CONSULTING26@GMAIL.COM		F (ser.
or further info	ermation conc	E-mail address: (erning this matter, please c	to be used for future annual report no all:	tification)	_
	KUTAY SATI	ROGLU			
	Name of Pe	rson	at (<u>808</u>) Area Code Daytii	726 - 1111 me Telephone Nun	nber
Enclosed is a cl	teck for the fo	ollowing amount:			
■ \$25.00 Filii	ng Fee (☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certif Certif	Filing Fee, icate of Status & ied Copy onal copy is enclosed)
Regis Divisi P.O. E	g Address: tration Section of Corp Box 6327 nassee, FL 3	orations	Street Address: Registration So Division of Co The Centre of 2415 N. Monro Tallahassee, Fl	rporations Tallahassee De Street, Suite	e 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KINGS YACHT			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	iny as it now appears Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	MARCH 21, 20	19 and assigned
Florida document numberL19000079672			
his amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liab	ility company hei	<u>re</u> :	
KINGS YACHT MANAGEMENT LLC			
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the de	signation "LLC" or th	ne abbreviation "L.L.C."
Inter new principal offices address, if applicable:	5445 COLLINS	AVE. CU-10	
Principal office address MUST BE A STREET ADDRESS)	MIAMI BEACH	1, FL 33140	
			철 .
			1
nter new mailing address, if applicable:	5445 COLLINS	AVE. CU-10	
Mailing address MAY BE A POST OFFICE BOX)	МІАМІ ВЕАСН	I, FL 33140	
. If amending the registered agent and/or registered office a gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		cords, enter the n	ame of the new registe
		, Florida	
	City	, Fiorida	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, 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
			□Add
			□Remove
			Change
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Tective date, if other an effective date is listed, to the listed of the	he date must he specifie : I in this block does no	and cannot be prior to of meet the applicab	date of filing or mo le statutory filing	أأسمنيمان فكالمعطادية	otional) der filing.) Pur his date will	suant to 605.0207 not be listed as
record specifies a delayer is filed.	ed effective date, but r	not an effective time	e, at 12:01 a.m. o	n the earlier of:	(b) The 90	th day after the
ited APRIL 19						
		K-				

Filing Fee: \$25.00