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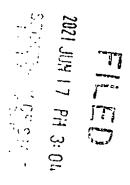
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COVER LETTER

	gistration So vision of Co				
SUBJECT:		Boat Adventures LLC			
NUBJECT		Name of Lin	nited Liability Company		
The enclose	ed Articles of	Amendment and fee(s) are sub-	omitted for filing.		
Please retur	n all correspo	ondence concerning this matter	to the following:		
		Perez, Noel			
			Name of Person		
			Firm/Company		~1
		2725 sw 1st Terr			1921 .
		-7-11 (Address		
		Cape Coral Fl 33991			17
		nveloso77@yahoo.com	City/State and Zip Code		2021 JUN 17 PN 3:0
			to be used for future annual report not	ification)	÷0+
For further	information c	oncerning this matter, please c	all:	·	
Perez, Noel	l		786 314-4734		
	Name o	f Person	Area Code Daytin	ne Telephone Number	-
Enclosed is	a check for the	he following amount:			
■ \$25.00	Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	[] \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fe Certificate of Si Certified Copy (additional copy is	tatus &
Re	ailing Addres	Section	<u>Street Address:</u> Registration Se	ction	
	vision of C O. Box 632	orporations	Division of Cor The Centre of T	porations	
	o. Box 032 Illahassee, I			e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jet Ski & Boat Adventures 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 fried on __ and assigned Florida document number <u>L19000106973</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N&C Cargo Service LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation 2725 sw. 1st Terr Enter new principal offices address, if applicable: Cape Coral Fl 33991 (Principal office address MUST BE A STREET ADDRESS) 2725 sw 1st Terr Enter new mailing address, if applicable: Cape Coral FI 33991 (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address _, Florida _

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 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

Title	<u>Name</u>	Address	Type of Action
AMBR	Gonzalez, Yudełkis	2725 sw 1st terr	■Add
		Cape Coral Fl 33991	□ Remove
			Change
			
			□ Rêmove
			□ CAdd (1==)
			Change
	-		
		-	□ Remove
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Effective date, if other than the	he date of filing:	(optional)	
Note: If the date inserted in this	nust be specific and cannot be prior to date of block does not meet the applicable state	thing or more than 90 days after filing.) Factory filing requirements, this date w	ursuant to 605,0207 (3 ill not be listed as th
document's effective date on the	Department of State's records.		
ne record specifies a delayed effectord is filed.	tive date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) The	90th day after the
	2021	2	
Dated June 12	, 2,,21		
Dated June 12			

Typed or printed name of signee