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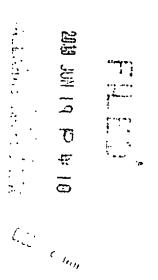
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COVER LETTER

	Name of Limi		
	rume of Billi	ited Liability Company	
d Articles of	Amendment and fee(s) are sub-	mitted for filing.	
all correspo	ondence concerning this matter	to the following:	
	Michael A Simko		
	Ship Safe LLC	Name of Person	
	6822 22nd Ave N #438	Firm/Company	
	St. Petersburg, Florida 337	Address	· · · · · · · · · · · · · · · · · · ·
nformation c			ort notification)
Simko		561 95112 at ()	264
Name o	f Person	Area Code	Daytime Telephone Number
a check for th	ne following amount:		
Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status & Certified Copy (additional copy is enclosed)
	n all corresponding of the corresponding of the corresponding to the cor	Michael A Simko Ship Safe LLC 6822 22nd Ave N #438 St. Petersburg, Florida 337 michaelasimko@hotmail.co E-mail address: (Information concerning this matter, please case) Simko Name of Person a check for the following amount: Filing Fee \$30.00 Filing Fee &	Name of Person Ship Safe LLC Firm/Company 6822 22nd Ave N #438 Address St. Petersburg, Florida 33710 City/State and Zip Code michaelasimko@hotmail.com E-mail address: (to be used for future annual rep Information concerning this matter, please call: Simko Name of Person Area Code a check for the following amount: Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy

MAILING ADDRESS:

Registration Section

Division of Corporations

TO:

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

TO ARTICLES OF ORGANIZATION OF

Ship Safe LLC

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

The Articles of Organization for this Limited Lia Florida document number L19000137815	ibility Company	were filed on <u>5/22/2019</u>	and assigne
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
ShipSafe LLC			
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	13378 Georgian Ct	
Principal office address MUST BE A STREET		Wellington, FL 33414	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6822 22nd Ave N #438 St. Petersburg, FL 33710	
B. If amending the registered agent and/o registered agent and/or the new registered off	_		records, enter the name of th
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:	13378 Georgia	n Ct Enter Florida str	eet address
	Wellington		, Florida 33710
	-	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 we provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Act
AMBR	Justin Bailey		
		(2511)	Add
		6254 Ungerer St Jupiter, FL 33458	Remove
			□ Change
			Remove
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			Change

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effective.	date, if other than the date of filing: (optional)
f an effecti	ve 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 605.02
Note: If t	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
document	's effective date on the Department of State's records.
ie recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
	Oth day after the record is filed.
	1.00 17 7019
Dated	Nichal A Shed
	$A \cdot A \cdot$
	Nuclear M Sha
	Signature of a member or authorized representative of a member
	Michael A Simbo
	Michael A Simko
	Typed or printed name of signee

If

Page 3 of 3

Filing Fee: \$25.00