

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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## **COVER LETTER**

|              | egistration Sec<br>ivision of Corp |  |   |   |  |  |  |
|--------------|------------------------------------|--|---|---|--|--|--|
| end mer      |                                    | Recovery LLC                                 |   |   |  |  |  |
| SUBJECT      | :                                  | Name of Limi                                 | ted Liability Company   |   |  |  |  |
| The enclos   | ed Articles of A                   | Amendment and fee(s) are sub                 | nitted for filing.  |   |  |  |  |
| Please retu  | rn all correspor                   | dence concerning this matter                 | to the following:   |   |  |  |  |
|              |                                    | Ralph Keith McClure                          |   |   |  |  |  |
|              |                                    |  | Name of Person  |   |  |  |  |
|              |                                    | Ocean Cable Recovery LL                      | С   |   |  |  |  |
| Firm/Company |                                    |  |   |   |  |  |  |
|              |                                    | 5316 53rd Ave E, Unit I-1                    | 0   |   |  |  |  |
|              |                                    |  | Address   |   |  |  |  |
|              |                                    | Bradenton, FL 34203                          |   |   |  |  |  |
|              |                                    |  | City/State and Zip Code   | ·   |  |  |  |
|              |                                    | kmcclure00@yahoo.com                         |   |   |  |  |  |
|              |                                    | E-mail address: ()                           | to be used for future annual report                                 | notification)   |  |  |  |
| For further  | information co                     | oncerning this matter, please co             | ıll:  |   |  |  |  |
| Claire P W   | itting Account                     | ant EA                                       | 941 776-150<br>at ( )   |   |  |  |  |
|              | Name of                            | Person                                       | Area Code Da  | sytime Telephone Number   |  |  |  |
| Enclosed is  | s a check for th                   | e following amount:                          |   |   |  |  |  |
| \$25.00      | Filing Fee                         | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |  |  |  |

MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327

STREET/COURIER ADDRESS: Registration Section Division of Corporations

Clifton Building

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



| Ocean Cable Recovery LLC   | 2019 STV 6 VALIE 10                                 |
|--|---|
| (Name of the Limited Liability Company as it now a<br>(A Florida Limited Liability Comp  | oppears on our records.)                            |
| The Articles of Organization for this Limited Liability Company were filed of Florida document number L19000211471                   | on and assigned                                     |
| This amendment is submitted to amend the following:  |   |
| A. If amending name, enter the new name of the limited liability compa   | ny here:  |
| 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)  |   |
| Enter new mailing address, if applicable:  |   |
| (Mailing address MAY BE A POST OFFICE BOX)   |   |
| B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here: | ss on our records, enter the name of the new        |
| Name of New Registered Agent:  |   |
| New Registered Office Address:   | er Florida street address                           |
|  | er er.  |

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.

City

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>         | <u>Address</u>                                     | Type of Action |
|--------------|---------------------|--|----------------|
| AMBR         | Ralph Keith McClure | 5316 53rd Ave E, Unit 1-10,<br>Bradenton, FL 34203 |                |
|              |                     |  | □ Remove       |
|              |                     | ***************************************            | ■ Change       |
| Mbr          | Bob Swartz          | 5316 53rd Ave E, Unit I-10<br>Bradenton, FL 34203  | Add            |
|              |                     |  |                |
|              |                     |  | Change         |
| Mbr          | Diana Lynn McClure  | 5316 53rd Ave E, Unit I-10<br>Bradenton, FL 34203  | <b>=</b> Add   |
|              |                     |  | □ Remove       |
|              |                     |  | ☐ Change       |
|              |                     |  | D Add          |
|              |                     |  | ☐ Remove       |
|              |                     |  | □ Change       |
|              |                     | _  | Add            |
|              |                     |  | □ Remove       |
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| an enective date<br>lote: If the dat | if other than the<br>is listed, the date must<br>e inserted in this blo<br>ctive date on the De | ock does not med              | et the applicab |                |               |               | ant to 605.0207<br>ot be listed as |
| e record spe<br>The 90th d           | ecifies a delayed<br>ay after the reco  | effective dated ord is filed. | te, but not     | an effective t | time, at 12:0 | 01 a.m. on th | ne earlier o                       |
|                                      | er 6  |                               | 2019            | ·              |               |               |                                    |
| Septemb                              |   | ·                             |                 | •              |               |               |                                    |