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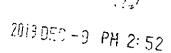
O: Registration Section Division of Corporations	•
JBJECT: Kracken Coastal Charters LLC Name of Limited Liability Company	
ne enclosed Articles of Amendment and fee(s) are submitted for filing.	
ease return all correspondence concerning this matter to the following:	
Dylan Hood Name of Person	
7909 Ne 4th Place	
Address Cape Coral, FL 33909 City/State and Zip Code hood 239 @ gmail. (om E-mail address: (to be used for future Minual report notification)	
E-mail address: (to be used for future minual report notification)	
or further information concerning this matter, please call:	
Dylan Hood at (239) 895-6942 Name of Person Area Code Daytime Telephone Number	
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TO:

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



KRACKEN COASTAL CHARTERS 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 filed on Sept. 20, 2019 and assigned Florida document number L/9000237824 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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

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
			□Add
			□Remove
			Change
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Page 2 of 3

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<u>Note</u>	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	December 5 2019
	Signature of a member or authorized representative of a member
	Dylan Hood Typed or printed name of signee

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Filing Fee: \$25.00