Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BY HOLDINGS, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

JAN 05 2023

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Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION JAN -4 AMII: 27

BY HOLDINGS, LLC		
(<u>Same of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number L20000015063	any were filed on 01/08/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
Boatyard, LLC		
The new name must be distinguishable and contain the words "Limited L	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	ù <u></u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ice address on our records, <u>enter the</u>	name of the new registers
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	974 * 1	

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.

Ciţv

Zip Code

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>	Name	Address	Type of Action
			🖸 Add
			Remove
		□Add	
			□Remove
			□Change
			□Add
			□Remove
		-	Remove
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			□Add
			Remove
			Change
	MINISTER CONTROL OF THE CONTROL OF T		□Add
			Remove
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tion, enter change(s) he	e re: (Attach addition	al sheets, if necessary 2022	JAN-4 AM
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Associate CP		6 A7 N	
ock does not meet the appl	icable statutory filing r	than 90 days after filing.) equirements, this date v	Pursuant to 605,0207 (3 will not be listed as the
e date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The	90th day after the
. 2023	·		
	date of filing: st be specific and cannot be prilock does not meet the applepartment of State's record	edate of filing: It be specific and cannot be prior to date of filing or more lock does not meet the applicable statutory filing repartment of State's records.	date of filing:

Filing Fee: \$25.00

Typed or printed name of signee