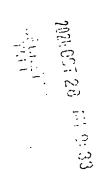


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





10/29/24--01024--029 **25.00



COVER LETTER

SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Gianni Brill Gianni Brill	
Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	
Please return all correspondence concerning this matter to the following:	
Gianni Brill	
Name of Person	
BACINI YACHTING	
Firm/Company	
1043 Hillsboro Mile 21C	
Address	
Hillsboro Beach, FI. 33062	
City/State and Zip Code	
baciniyachting@gmail.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: Gianni Brill Name of Person Area Code Daytime Telephone Number) }
Name of Person Area Code Daytime Telephone Number	၁ ဘ
Enclosed is a check for the following amount:	EL 9-33
■ \$25.00 Filing Fee Certificate of Status Certified Copy radditional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed)	
Mailing Address: Registration Section Street Address: Registration Section	
Division of Corporations Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BACINI YACHTING LLC				
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our r Liability Company)	ecords.)	
The Articles of Organization for this Limited I Florida document number 1.20000033924	iability Company	were filed on 01/28/2020		and assigned
	 .			
'his amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name o</u>	of the limited liab	oility company here:		
ADDRESS				
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:		6461 NE 2ND AVE #503		
Principal office address MUST BE A STREET ADDRESS)		BOCA RATON, FL 3348	7	
				23
			27.7 0.7	
Enter new mailing address, if applicable:		1043 Hillsboro Mile 21C	ر سر آ س	
Mailing address MAY BE A POST OFFICE	Hillsboro Beach, FL 3306	2	`පා	
If amending the registered agent and/or		address on our records, <u>e</u>	nter the name of	the new regist
gent and/or the new registered office addre	ess here:			
Name of New Registered Agent:	Rosalinda Phili	pson		
New Registered Office Address:	6461 NE 2ND	AVE 503,		
		Enter Florida street a	ddress	
	BOCA RATON	٧.	Florida <u>33487</u>	
		City		'ip 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 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Rosalinda Philipson	6464 NE 2nd Ave. 503, Boca Raton, FL. 33487	= Add
			□Remove
			□Change
MGR PETER STARFLINGER		□Add	
		225 SE 16TH AVE, FORT LAUDERDALE, FL 33.	301 ■Change
MGR	Gianni Brill		□Add
		□Remove	
	1043 Hillsboro Mile 21C Hillsboro Beach, FL 3306	🗏 Change	
		, n	707EDCT
		- `` ⊡Remove	
		<u> </u>	∷ □Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

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ctive date, if other than the date of filing:	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.02
If the date inserted in this block does not meet the applicab iment's effective date on the Department of State's records.	ole statutory filing requirements, this date will not be listed
ord specifies a delayed effective date, but not an effective time filed.	e, at 12:01 a.m. on the earlier of: (b) The 90th day after the
10/16/2021	
d 10/16/2024	
The state of the s	
Signature of a member or authorize	<u> </u>