

7/9/2020

# L20000057957

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : GFS TAX & ACCOUNTING SERVICES  
Account Number : 120140000089  
Phone : (754)301-2128  
Fax Number : (954)252-4650

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

Email Address: INFO@GFSTAXACCT.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
S&Y BOATS & JETSKI RENTALS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2020 JUL -9 PM 3:49

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*LLC Amend*

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JUL 10 2020

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** S&Y BOATS & JETSKI RENTALS LLC  
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:

GILVAM F DOS SANTOS  
Name of Person  
GFS TAX & ACCOUNTING SERVICES  
Firm/Company  
2001 W CYPRESS CREEK RD STE 102 B  
Address  
FT LAUDERDALE FL 33309  
City/State and Zip Code  
INFO@GFSTAXACCT.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GILVAM F DOS SANTOS at ( 954 ) 9573244  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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, Certificate of Status & Certified Copy (additional copy is enclosed)

**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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

S&Y BOATS & JETSKI RENTALS LLC

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

2020 JUL - 9 PM 12:10

The Articles of Organization for this Limited Liability Company were filed on 02/20/2020 and assigned Florida document number L20000057957

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 "L.L.C."

Enter new principal offices address, if applicable:

3130 NE 190TH ST APT 303

(Principal office address MUST BE A STREET ADDRESS)

AVENTURA FL 33180

Enter new mailing address, if applicable:

3130 NE 190TH APT 303

(Mailing address MAY BE A POST OFFICE BOX)

AVENTURA FL 33180

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:

3130 NE 190TH APT 303

Enter Florida street address

AVENTURA

City

Florida 33180

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 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

[Handwritten signature]

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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>	<u>Type of Action</u>
AMBR	BREVE, YAVOR	3130 NE 190TH ST APT 303	<input type="checkbox"/> Add
		AVENTURA FL 33180	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	BREVE, SIMONE M	3130 NE 190TH APT 303	<input type="checkbox"/> Add
		AVENTURA FL 33180	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

N/A

Multiple horizontal lines for amending information.

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JULY 02, 2020

Signature of a member or authorized representative of a member  
BREVE, YAVOR  
Typed or printed name of signee

Filing Fee: \$25.00