L20000153022

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SECRETARY OF STATE

TALL AND SECRETARY OF STATE

A. BUTLER FEB 16 2022

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Car	Ptain AI'S P Name of Limi	106.1e Ma Rive	Services CCC
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspo	indence concerning this matter t	to the following:	
	ANDREWE	Bu RR Name of Person	
	Captain A	Firm/Company	line Services LLC
	Po Box 63	Address	
	FERNANDIN	City/State and Zip Code	<u> 32035</u> -
	Capta Na E-mail address: (1	Ma Rive & & Mail	ication)
For further information co	oncerning this matter, please ca	III:	
Andrew & Name o	ERURR AZ f Person	at (<u>904</u>) <u>575-</u> Area Code Daytim	1448 ie Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S Division of C P.O. Box 632	Section orporations	Street Address: Registration Se Division of Con The Centre of T	porations

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF.

FILED

CaPtain A I's Mobi	ompany as it now appears on our records.) mited Liability Company) SECRETARY OF STATE
The Articles of Organization for this Limited Liability Com	pany were filed on 10 - 04 - 2018 and assigned
florida document number <u>CP 575 B</u> .	, ,
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	I liability company here:
CaPtain AJ' Marine Se The new name must be distinguishable and contain the words "Limited"	Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	50 MC
Principal office address MUST BE A STREET ADDRES	
Enter new mailing address, if applicable:	SAME
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	SAMC
New Registered Office Address:	
	Enter Florida street address
	, Florida
	CHV 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

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>	Address	Type of Action
			□Add
			□Remove
	·		□ Add
			□Remove
			□Change
			□Add
			Remove
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ctive date, if other the	han the date of filing: _ date must be specific and car	nnot be prior to date:	of filing or more than 9	(optional) 0 days after filing.) Pu	rsuant to 605.020
<u>e:</u> If the date inserted i	in this block does not mee on the Department of Stat	t the applicable sta	autory filing require	ments, this date wil	I not be listed a
ord specifies a delayed filed.	effective date, but not an	effective time, at	12:01 a.m. on the ea	rlier of: (b) The 90	ith day after the
d <u>1-16-20</u>	Signature of a mer	·			
foli-	- E B		2		
	Signature of a mer	nber or authorized re	presentative of a mem	bei	
			of signer		



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2022 JAN 31 PM 1:40

SECRETARY OF STATE TALLAHASSEE, FL

January 12, 2022

ANDREW E BURR PO BOX 635 FERNANDINA BEACH, FL 32035

SUBJECT: CAPTAIN AJ MOBILE MARINE SERVICES LLC

Ref. Number: L20000153022

We have received your document for CAPTAIN AJ MOBILE MARINE SERVICES LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 222A00000969

Anissa Butler Regulatory Specialist II

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