## 120000227713

| (Req                      | uestor's Name)   | , <u>, , , , , , , , , , , , , , , , , , </u> |
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| Certified Copies          | Cartificates     | of Status                                     |
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|                           |                  | _ <del></del>                                 |
| Special Instructions to F | iling Officer:   |   |
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## **COVER LETTER**

| Divis            | ion of Corpo   | orations  |   |  |  |
|------------------|----------------|---|---|--|--|
|                  |                | JetSki Wave L.L.C.                              |   |  |  |
| SUBJECT          |                | Name of Limit                                   | ted Liability Company   | · · · · · · · · · · · · · · · · · · ·  |  |
| The enclosed /   | Articles of A  | mendment and fee(s) are subn                    | nitted for filing.  |  |  |
| Please return a  | ill correspond | dence concerning this matter t                  | o the following:  |  |  |
|                  |                | Jenny Countz                                    |   |  |  |
|                  |                |   | Name of Person  | <del></del>  |  |
|                  |                | ZenBusiness Inc                                 |   |  |  |
|                  |                |   | Firm/Company  |  |  |
|                  |                | 5511 Parkerest Dr., Suite 207                   |   |  |  |
|                  |                | <del></del>                                     | Address   |  |  |
|                  |                | Austin, TX 78731                                |   |  |  |
|                  |                |   | City/State and Zip Code   |  |  |
|                  |                | fulfillment@zenbusiness.cor                     |   |  |  |
|                  |                | E-mail address: (te                             | o be used for future annual report no                                     | otification)   |  |
| For further info | ormation con   | cerning this matter, please ca                  | II:   |  |  |
| Jenny Countz     |                |   | at () 493-6249<br>Area Code Dayt  |  |  |
|                  | Name of F      | Person  | Area Code Dayt  | ime Telephone Number   |  |
| Enclosed is a c  | check for the  | following amount:                               |   |  |  |
| ■ \$25.00 Fil    | ing Fee        | ☐ \$30.00 Filing Fee &<br>Certificate of Status | ☐ \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |  |

MAILING ADDRESS: Registration Section

TO:

Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Atlantis JetSki Wave L.L.C. (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  $\frac{07/30/2020}{1}$ Florida document number  $\frac{1.20000227713}{1.00000227713}$ 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.

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 |
|------------------------|-------------------------|-------------------------|----------------|
| AMBR                   | Jean Emmanuel Soulouque | 1241 South Kirkman Road | Add            |
|                        | <del></del>             | Apt 2145                | U Aud          |
|                        |                         |                         | ■ Remove       |
|                        |                         | Orlando, F1, 32811      | ☐ Change       |
| AMBR nick pierre louis | 1241 South Kirkman Road | <b>■</b> Add            |                |
|                        | Apt 2145                | Add                     |                |
|                        |                         |                         | Remove         |
|                        |                         | Orlando, FL 32811       | Change         |
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| D. If amending any other inform   | ation, enter change(s) here: (Attach       | additional sheets, if necessary.)  |
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| E. Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I | flock does not meet the applicable statuto | (optional) ing or more than 90 days after filing.) Pursuant to 605.0207 (3) ory filing requirements, this date will not be listed as the |
| f the record specifies a delaye<br>b) The 90th day after the re   |  | ctive time, at 12:01 a.m. on the earlier of:   |
| Dated September 10  | . 2021                                     |  |
| /s/ Mike Price Etien  | ne   |  |
| M1 182 197  | Signature of a member or authorized repres | entative of a member   |
| Mike Price Etienne  | Typed or printed name of si                | ignec  |

Page 3 of 3

Filing Fee: \$25.00