Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000088555 3)))



H230000885553AB03

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MARK B. GOLDSTEIN, P.A.

Account Number : I20060000077 Phone : (561)989-9955 Fax Number : (561)989-9966

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

Email Address: MBG&B12AVLAW, COM

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION DEVIL DOG MARINE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$52.50

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H23000088555 3)))

Devil Dog Marine, LLC						
(Name of the Limited L (A F	ability Company as it now apper forida Limited Liability Company	ars on our records.)				
The Articles of Organization for this Limited Liabil Florida document number L20000266507	ity Company were tiled on _	09/03/2020	and assigned			
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the	limited liability company l	<u>iere</u> :				
The new name trust 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	:					
(Principal office address MUST BE A STREET A	DDRESS)					
Enter new mailing address, if applicable:						
Mailing address MAY BE A POST OFFICE BOX	า					
	<u></u>					
	· · 	• • •				
B. If amending the registered agent and/or regist	ered office address on our	records, enter the	name of the new regis			
egent and/or the new registered office address he	<u>re</u> :		ज्य (
			C3 /-			
Name of New Registered Agent:	 -					
New Registered Office Address:						
	Enter Flo	rida sircei address	. 4-			
		, Florid:	a			
_	City	, , , , , , , , , , , , , , , , , , , ,	Zip Code			
New Registered Agent's Signature, if changing Regist	tered Agent:					
hereby accept the appointment as registered ago provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	id complete performance of d agent as provided for in t tered office address, I here	f my duties, and Li Chapter 605, F.S.	am familiar with and Or, if this document i			

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:

<u>Title</u>	uthorized Member (H23000088555 3))) Name	Address	Type of Action
MGR	Alexandra Martin	2324 SE Liberator Lanc, Suite 301, Stuart, FL 34996	_ ≣Add
			_ ⊡Removc
			_ TChange
			_ □Add
			_ 🗆 Remove
			_ DChange
			_ DAdd
			_ □Remove
			_ TChange
			_ □∧dd
			_ 🗆 Remove
			_ □Change
			_□Add
			_⊏Remove
			_ 🗆 Change
****			_□∧dd
			Remove
(((H23000088555 3)))		_ Change

	-
	-
	-
	-
	-
	-
	-
	•
	•
	•
	-
	•
Effective date, if other than the date of filing:	5,0207 (. .ed as ti
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (h). The 90th day afte d is filed.	r the
Dated	
Signature of a industrial of a member of a member Mark B. Goldstein	

(((H23000088555 3)))

Filing Fee: \$25.00