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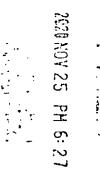
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COVER LETTER

	tlaws Underwater Services LLC		
30B3CC1.	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Kimberly Loftin		
		Name of Person	
	Ocean Outlaws Underwate	r Services LLC	
		Firm/Company	
	9100 52nd Way N.		
	-	Address	
	Pinellas Park, FL 33782		
		City/State and Zip Code	
	tridentunderwaterservices@		<u></u> _
		to be used for future annual report not	tification)
For further information	concerning this matter, please co	all:	
Kimberly Loftin		727 543-9366	
Name	of Person	at () Area Code Daytir	ne 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 Addre	<u>2883:</u>	Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

.

TO:

Registration Section Division of Corporations

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ocean Outlaws Underwater Services LLC		æ
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our reda Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability	Company were filed on November 2.	2020 and assigned
Florida document number L20000346912		學 是 告
This amendment is submitted to amend the following:		6. 27
A. If amending name, enter the new name of the lir	nited liability company here:	·
Trident Underwater Services LLC		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation	"LLC" or the abbreviation "L.IC."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here: Name of New Registered Agent:		nter the name of the new registered
New Registered Office Address:		
New Registered Office Address.	Enter Florida street a	ddress
		. Florida
	City	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
			□Change
 .			
			□Remove
			□Change
		 	□Add
			□Remove
			☐ Change
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			□Change
			□ Add
	•		
	 		
			□Change

The tive date, if other than the date of filing: November 2, 2020 (optional) (optional)			
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d is filed.	Note: If the date inserted in this bloc	late of filing:(optional) be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 k does not meet the applicable statutory filing requirements, this date will not be lis	05.0207 (i sted as tl
November 16 2020 Lulle Jatt Signature of a member or authorized representative of a member Kimberly Loftin	d is filed.		er the
Kimberly Loftin	November 16	2020	
Kimberly Loftin	Ke herly &	ignature of a member or authorized representative of a member	
	Kimberly Loftin		