## L21000079893

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only/Otale/Zip/) Holie #/
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2022 MAY TO FN 6: 14

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## **COVER LETTER**

TO: Registration So Division of Cor				
	ACHT GROUP LLC			
			. ;	
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		
	Ben Donnelly			
		Name of Person		_
	ELITE YACHT GROUP	LLC		
	·	Firm/Company		_
	1290 Laurel Court			
		Address		-
	Weston FL 33326			
	ben@eliteyachtgroup.com	City/State and Zip Code		-
	E-mail address: (	to be used for future annual repor	t notification)	
For further information of	concerning this matter, please c	all:		
Ben Donnelly	, , , , , , , , , , , ,	954 670 43	60	
<i>5</i> 211 <i>5 5</i>		at ()		
Name (	of Person	Area Code Di	aytime Telephone Numbe	r
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &
Mailing Addre		Street Addres		
Registration	Section	Registration		

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

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

IIZATION

ELITE YACHT GROUP LLC	2022 MAY 10 PH 6: 14
(Name of the Limit	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited L Florida document number L21000079893	Liability Company were filed on FEB 16th 2021 and assigned
This amendment is submitted to amend the foll	lowing:
A. If amending name, enter the new name o	of the limited liability company here:
The new name must be distinguishable and contain the vector new principal offices address, if application of the contain the vector new principal office address MUST BE A STREE	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our records, enter the name of the new registees here:
Name of New Registered Agent:	DAVID C. LAVALLE, ESQ., ZIPRIS LAVALLE PA
New Registered Office Address:	12000 BISCAYNE BLVD., SUITE 401
	Enter Florida street address NORTH MIAMI

## 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.

Cuv

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

Title	<u>Name</u>	2022 MAY 10 PH 6: 14	Type of Action
MGR	LINSAY	1290 Laurel Court, Weston FL 33326-	
		· · · · · · · · · · · · · · · · · · ·	■Add
			□ Remove
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			□ Change

	2022 MAY TO PH 6: 14	
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n effectiv <b>te:</b> If th	date, if other than the date of filing:	7 (3)(t s the
. (711	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	
ed	5TH MAY 2021 17.	
	Signature of a member or authorized representative of a member	
	BEN DONNELLY	
	Typed or printed name of signee	

E. C35.00