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(Requestor's Name)
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COVER LETTER

Division of Corpo	orations			
Boat Partners SUBJECT:	II ·			
SUBJECT.	Name of Limi	ited Liability Company		
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
	Cory Liffrig			
		Name of Person	<u>.</u>	
	Boat Patners II, LLC			
		Firm/Company		
	9210 Highland Ridge Way			
		Address		
	Tampa, FL 33647			
		City/State and Zip Code		
	sixsiglb@gmail.com	to be used for future annual	report notification)	
For further information cor	ncerning this matter, please ca		,	
Thomas Frankfurth	, , , , , , , , , , , , , , , , , , , ,		7-1501	
Name of I	Person	at ()	Daytime Telepho	one Number
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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 enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:		Street Ac	ddress:	

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

TO:

Registration Section

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

Boat Partners II			
(Name of the Limited	d Liability Compa A Florida Limited I	ny as it now appears on our record Liability Company)	5,)
he Articles of Organization for this Limited Lia lorida document number L21000302460		were filed on July 2, 2021	and assigned
his amendment is submitted to amend the follow			
. If amending name, enter the new name of	the limited liab	ility company here:	
he new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designation "LLC	or the abbreviation "L.L.C."
inter new principal offices address, if applica	ble:	9210 Highland Ridge	
Principal office address MUST BE A STREET		Tampa, FL 33647	
			
Inter new mailing address, if applicable:		9210 Highland Ridge	
Mailing address MAY BE A POST OFFICE B	BOX)	Tampa FL, 33647	
3. If amending the registered agent and/or regent and/or the new registered office address		address on our records, <u>enter</u>	the name of the new regist
Name of New Registered Agent:			
New Registered Office Address:	9210 Highland		
		Enter Florida street addres	
	Tampa	, FI	orida 33647 Zip Code:
New Registered Agent's Signature, if changing R	egistered Agent:		Zip Code:
			i

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
MGR	Howard Baughman	9206 Highland Ridge Way	UAdd
		Tampa, Fl. 33647	5
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Signature of amtember or authorized representative of a member		1 /16					
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Filing Fee: \$25.00