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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

Email	Address:			
CHICALL	MUUI ESS.			



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **EZ MONEY INVESTMENTS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EZ Money Investments LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	
he Articles of Organization for this Limited Liability C	Company were filed on <u>07/13/2021</u>	and assigned
orida document number L21000318302		
nis amendment is submitted to amend the following:		
If amending name, enter the new name of the lim	ited liability company here:	
Maritime Services LLC		
e new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	RESS)	
nter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered ent and/or the new registered office address here:	d office address on our records, <u>enter the na</u>	me of the new regi
	5	.
Name of New Registered Agent:	*	2023
New Registered Office Address:		ان. ن
	Enter Florida street address	= :
	Florida _	-
	Crộ:	Zip Code

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.

New Registered Agent's Signature, if changing Registered Agent:

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			[]Remove
			□Change
		·····	⊡Add
			□Remove
			☐ Change
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an eff lote:	ve date, if other than the date of filing:
recore Lis fil	I specifies 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.
ated	March 14 2023
	Signature of a member or authorized representative of a member
	aignature of a method of authorized representative of a member
	Nat Smith
	Typed or printed name of signee

Filing Fee: \$25.00