L21000380502

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
		
(City/S	itate/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	ne)
(Docui	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	·]

Office Use Only



500384402725

04/01/22--01014--023 *+25.00

DIVISION OF CORPORATIONS

22 APR -1 PH 12: 11

T. MATTHEWS APR 15 2022

COVER LETTER

TO:	Registration Sec Division of Corp					
cup is		8 MARINE SERVICES LLC		·		
SUBJE	CI:	Name of Limited Liability Company				
The enc	losed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspor	ndence concerning this matter	to the following:			
		PEDRO GERMAN CORR	ALES CASANOVA			
			Name of Person			
			Firm/Company			
		333 NE 24TH ST, APT. 11	108			
		MIAMI, FL 33137	Address			
			City/State and Zip Code			
		E-mail address: (to be used for future annual report no	otification)		
For furt	her information co	ncerning this matter, please ca	all:			
PEDRO	GERMAN COR	RALES CASANOVA	at ()			
	Name of	Person	at () Area Code Dayt	me Telephone Number		
Enclose	d is a check for the	e following amount:				
■ \$25	.00 Filing Fee	S30.00 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 ADDRESS:

TO:

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1997年1日1日 - 1997年 - 1998年 - 19



Garage 58 Marine Services LLC

22 APR - 1 PH 12: 11

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{08/25/2021}{2}$ _____ and assigned Florida document number _____L21000380502 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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>	<u>Address</u>	Type of Action
VP	CARLOS LUIS DOUBRONT CORRALES	821 SW 18TH AVE, APT. 205 MIAMI, FL 33135	
			■ Remove
			□ Change
VP	VP MARIA GABRIELA CORRALES CASANOVA	333 NE 24TH ST, APT. 1108 Miami, FL 33137	■ Add
			□ Remove
			☐ Change
			□ Add
			Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			Add
			Remove
			□ Change

•		
-		
,		
		 _
•		
,		· · · · · · · · · · · · · · · · · · ·
·		
		
Effect	tive date, if other than the date of filing:	(optional)
(If an cf	Tective date is listed, the date must be specific and ca	annot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02
	nent's effective date on the Department of State	eet the applicable statutory filing requirements, this date will not be listed ate's records.
the re	cord specifies a delayed effective dat	ite, but not an effective time, at 12:01 a.m. on the earlier
	90th day after the record is filed.	
Dated	March 22nd	2022

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00