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T. MATTHEWS

## **COVER LETTER**

Division of C	orporations		
Humble a	and Kind Yacht Charters, LLC		
SUBJECT.	Name of Li	mited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	pondence concerning this matte	r to the following:	
	Rolando Diaz		
		Name of Person	
	<del></del>	Firm/Company	
	9155 South Dadeland Blv	d, Suite 1218	
		Address	
	Miami, Fl. 33156		
		City/State and Zip Code	<del></del>
	rdiaz@dlg-lawyers.com		
		to be used for future annual report notifi	ication)
For further information	concerning this matter, please c	all:	
Rolando Diaz		305 7773500 at ()	
Name	of Person	Area Code Daytime	Telephone Number
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)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration :	Section	Pagistration Cont	:

Registration Section
Division of Corporations
P.O. Box 6327

TO:

Registration Section

Tallahassee, FL 32314

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

## TO STATE OF CORPORATIONS OF CORPORATIONS OF

Humble and Kind Yacht Charters, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000503633</u> .	were filed on November 24, 2021	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	6202 Paradise Point Dr.	
Principal office address MUST BE A STREET ADDRESS)	Palmetto Bay, 33157	
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
<ol> <li>If amending the registered agent and/or registered office a gent and/or the new registered office address here:</li> </ol>	address on our records, <u>enter the nar</u>	ne of the new registe
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		
	Enter Florida street address	
<del></del>	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 eing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

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>	Address	Type of Action
MGR	Lawrence Salas	6202 Paradise Point Dr	
		Palmetto Bay, Fl. 33157	□Remove
			□Change
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			🗀 Remove
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ffective date, if other than the data an effective date is listed, the date must bote: If the date inserted in this blococument's effective date on the Dep	k does not meet the ap	plicable statu	filing or more that tory filing requ	option (option 90 days after firements, this o	i <b>al)</b> ling.) Pursuant to date will not be l	605.0207 isted as
record specifies a delayed effective of is filed.	late, but not an effectiv	re time, at 12:	01 a.m. on the	earlier of: (b)	The 90th day a	fter the
February 2.	2022	<u> </u>				
8 July						
Si Si	gnature of a member or a	uthorized repre	esentative of a mo	ember		