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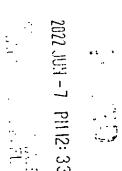
(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Corp	oorations		
summer Beau	on to Bay Charte Name of Lim	57 1 L L	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Daniel Ra	Name of Person	·····
		Firm/Company	<u></u>
	2571 70th	Ave sath	
	Sount Petersburg	Dirida 33711 City/State and Zip Code	
	Danison 7276 E-mail address: (g be used for future annual report noti	fication)
For further information co	oncerning this matter, please ca	all:	
Dany 350 Name of	Person	at (727) Gold: Area Code Daytim	35-43
Name ()	T CISOII	nica code Bayini	e receptione reduces
Enclosed is a check for th	e 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 S Division of Co		Registration Se Division of Cor	
P.O. Box 632	•	The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Beach to Bay Chart	cry LLC		Z022 JU:	₹-7 PM (2: 33
(Name of the Limited Liabilit (A Florida	ty Company as it now app Limited Liability Company	ears on our re-	cords.)	
			-	71
The Articles of Organization for this Limited Liability C	ompany were filed on	Fcb, 25	2012	_ and assigned
Florida document number <u>L22000101089</u>	·	•	·	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ted liability company	here:		
Beauside Charters LLL				
The new name must be distinguishable and contain the words "Limit	ited Liability Company," th	e designation "	LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	ESS)			
	 -			
Enter new mailing address, if applicable:	-			
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our	r records, <u>en</u>	ter 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 F	Florida street aa	ldress	
			, Florida	
	City		, <u></u>	Zin Code

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

D

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 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
			DAdd
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			□ Remove
			☐ Change
		Adures	□Add
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an effection	e date, if other than the date of filing:	
record Lis file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afted.	er the
ated _	May 31 2021, Signature of a member or authorized representative of a member	
	\mathcal{A}	
	Signature of a member or authorized representative of a member	