## L22000328628

(Re	equestor's Name)	
(Ac	fdress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	me)
(Do	ocument Number)	-
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

## COVER LETTER

TO: Registration Se Division of Cor			~	
	Sports LL,C	•		
SUBJECT:	Name of Lim	ited Liability Company		
	Amendment and fee(s) are sub			
Please return all correspo	ondence concerning this matter	to the following:		
	Radek J Lermayer			
		Name of Person		
	Rad Water Sports LLC			
		Firm/Company		
	2729 SE Worrell Ave			
		Address		
	Port St. Lucie, FL 34952			22
		City/State and Zip Code		22 SEP 16
	torisanteramo@gmail.com	to be used for future annual report r		16
		·	ouncation)	2
For further information of	concerning this matter, please c	all:		9.
Radek J Lermayer		772 475-2550 at ()		<u>5</u> 8
Name o	of Person	Area Code Day	time 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 Certificate of Certified Cop (additional copy	Status & y
Mailing Addres Registration		Street Address: Registration		
Division of C		Division of C		
D O D (25	. =	TO C	CT 11 1	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rad Water Sports LLC			
( <u>Name of the Limited Liabil</u> (A Florid	ty Company as it now appears on our real Limited Liability Company)	cords.)	
The Articles of Organization for this Limited Liability C	company were filed on	and assigned	
Florida document number L22000328628			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and contain the words "Lim	sited 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 ADDI	RESS)	22	<u>;</u> ;
-		SE	<u> </u>
		<del>-</del>	<u> </u>
		9	- i-
Enter new mailing address, if applicable:		<del></del>	<del>- di</del> sco
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>	<u></u>
		<u></u>	<u>=</u> :-
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>e</u>	nter the name of the new regi	stered
Name of New Registered Agent:			
New Registered Office Address:			
-	Enter Florida street a	ldress	
		, Florida	
	City	Zip Code	<del></del>
New Registered Agent's Signature, if changing Registere	d Agent:		
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change.	omplete performance of my dutie gent as provided for in Chapter 6 ed office address, I hereby confiri	s, and I am familiar with and 05, F.S. Or, if this document	7

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	Victoria A Santeramo	2729 SE Worrell Ave	■Add
		Port St. Lucie, FL 34952	□Remove
			Change
			□Add
			□Remove
			DOMES INTERPRETATION OF COMMUNICATION OF
			☐ Refinitive (C)
			□Remove
			Change
			□ Add
			□Remove
			□ Change
			Remove
			De

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ote: If the date inserted in this blo	September 9, 2022  late of filing:  be specific and cannot be prior to date of filing or more ck does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
record specifies a delayed effective is filed.	date, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day after the
ated September 9th	. 2022	
<i>A       </i>	11	
- foolung	lignature of member or authorized representative of	a member

Filing Fee: \$25.00