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(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corp	porations			
SUBJECT:	YUBOATS Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	WAZU	S (ASIC Name of Person		
	YUBOK	TS LL®		
	7-40 S	Firm/Company	# 101	%
	<u> </u>	Address ELV BENCH FL, City/State and Zip Code	3:3441	22 AUG 18
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	City/State and Zip Code リタい (0 い to be used for future annual report r		CONFERENCE AM II: 36
For further information co	oncerning this matter, please ca	all:		36 36
Name of	NS'C	at (<u>766</u>) 273	time Telephone Number	<u> </u>
Name of	reison	Area Code Day	ume reteptione statuoei	
Enclosed is a check for th	e following amount:		/	
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	[2] \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate of Certified Cop (additional copy	Status & y
Mailing Address Registration S		Street Address: Registration		
Division of C		Division of C		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YUBOATS LLC					
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appe iability Company	ars on ou	r records.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L2200034 1819</u> .	were filed on _	08/0	<u> 23/2022</u>	and ass	signed
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi	lity company	<u>here</u> :			
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the	designati	on "LLC" or the abb	reviation "l.	.L.C."
Enter new principal offices address, if applicable:	SAME	As	PREVIOUS		
(Principal office address MUST BE A STREET ADDRESS)	1.5			-	
				22	1
Enter new mailing address, if applicable:	SAM=	4c	PREMIOUS	AUG 18	
Mailing address MAY BE A POST OFFICE BOX)				773m	0 4,5
				=======================================	GR E
				36	7
3. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our	records	, enter the name	of the ne	w registe
Name of New Registered Agent:	/				
				_	
New Registered Office Address:	Enter Fi	orida stree	et address		
			, Florida	/	
	City			Zip Code	
New Registered Agent's Signature, if changing Registered Agent:					
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as packed to merely reflect a change in the registered office company has been notified in writing of this change.	performance o rovided for in	of my du Chapte	ties, and I am fa r 605, F.S. Or, i	ımiliar wi f this doci	th and iment is

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>	Name	Address	Type of Action
			□Add
		 	□Remove
			□Change
			□ Remove 22 A
			□Œmgc [] — Se Si
			□ Add Good Service Se
			□Change
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			□Remove
			Change
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n ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Effect	ive date, if other than the date of filing: $\frac{\partial \mathcal{E}/45/2022}{\sqrt{15/2022}}$ (optional)	
f an et	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list	
	nent's effective date on the Department of State's records.	
ie re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli	er of
The	200th day after the record is filed	
Dated	07/13/2022	
	Taric 17	
	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member Typed or printed name of signee	
	Typed or printed name of signee	

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