Florida Department of State

Division of Corporations Electronic Ming Cover Shee

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BAITED HOOK FISHING CHARTERS LLC

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NOV 03 2022

M. SOLOMON

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION --OF

Baited Hook Fishing Charters LLC (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 09/12/22 and assigned Florida document number L22000397403 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 "LLC." 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

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 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
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The Effective date, if other than the date (It'an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	specific and cannot be prior to date of coors not meet the applicable statu	f filing or more than 90 days after fili	ng.) Pursuant to 605.02	07 (3)(b) as the
The record specifies a delayed effective decord is filed.	ate, but not an effective time, at 12	2:01 a.m. on the earlier of: (b)	The 90th day after th	ne
Dated November 3	. 2022			
C:	gnature of a member or authorized rep	recentative of a member		
Morgan Noble	Typed or printed name of	of signee		

Filing Fee: \$25.00