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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
ertified Copies Certificates of Status
Special Instructions to Filing Officer:
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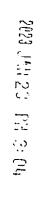
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December 21, 2022

EDWARD R GARTENMAYER 3341 RIVIERA DR. KEY WEST, FL 33040

SUBJECT: REEF RUNNER CHARTERS KEY WEST, LLC

Ref. Number: L22000404562

We have received your document for REEF RUNNER CHARTERS KEY WEST, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative". "Authorized Person". and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 022A00028522

152 171 3: 04

COVER LETTER

Registration Section Division of Corporations

T R 2 C 2001	r Charters Key West, LLC		
<u> </u>	Name of Lim	ited Liability Company	
inclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
e return all correspon	ndence concerning this matter	to the following:	
	Edward R Gartenmayer		
		Name of Person	
	Reef Runner Charters Key	West, LLC	
		Firm/Company	<u> </u>
	3341 Riviera Drive		
		Address	
	Key West, FL 33040		
		City/State and Zip Code	
	edward.reefrunnercharters@	•	<u> </u>
	E-mail address: (to be used for future annual report notif	ication)
further information co	oncerning this matter, please co	all:	
y Penke			305-906-0633
Name of	Person	Area Code Daytime	e Telephone Number
osed 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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Reef Runn (Name of the Limited	ev Chart Liability Company as Florida Limited Liabil	evs key Wist it now appears on our records.) ity Company)		
rticles of Organization for this Limited Liab	oility Company wer	e filed on	and assig	ned
a document number	,			
mendment is submitted to amend the follow	ving:			
amending name, enter the new name of t	he limited liability	company here:		
w name must be distinguishable and contain the wornew principal offices address, if applica cipal office address MUST BE A STREET	ble: _	Company," the designation "LLC" or th		
r new mailing address, if applicable:				
ling address MAY BE A POST OFFICE B	<u>20X)</u> _			
f amending the registered agent and/or re it and/or the new registered office address	gistered office add s here:	ress on our records, <u>enter the r</u>	name of the new	registered
Name of New Registered Agent:	Shay Penke			11
New Registered Office Address:		Enter Florida street address	3.04	<u> </u>
		City , Florida	Zip Code	
		•		

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

Preby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ng filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability appears has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

iding Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added oved from our records:

: Manager

=	Authorized	Member

	Name	Address	Type of Action
#	Edward R Gartenmayer	3341 Riviera Drive Key West, FL 33040	
RMS	R		Remove
			□Remove
			□Remove
			□ Change
			□Remove
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date, if other than the vedate is listed, the date in this the date inserted in this the effective date on the limits.	block does not m	eet the applicabl	date of filing or more to statutory filing rea	(option han 90 days after fil quirements, this d	ing.) Pursuant to 605.020
pecifies a delayed effect	ve date, but not	an effective time	, at 12:01 a.m. on th	ne earlier of: (b)	The 90th day after the
eptember 26	,	2022			
	X. Elyl	Datin	ed representative of a	mumbar	
•	Signature of a n	nember or authoriz	ed representative of a	memoer	
		i /			

Filing Fee: \$25.00