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(Requestor's Name)			
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	City/State/Zip/Phone #)		
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PICK-UP	WAIT MAIL		
	Business Entity Name)		
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(Document Number)			
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2022 OCT 17 AM 8: 25 SECRETARY OF STATE FALLAHASSEE, FLORID;

COVER LETTER

	egistration Se livision of Cor		•	
SUBJECT	H2O Boat C	Co LLC		
SOBJECT	•	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ım all correspo	ndence concerning this matter	to the following:	
		Filing Angela		
			Name of Person	
		ZenBusiness, Inc.		
			Firm/Company	
		336 E. College Ave., Suite	• 301	
			Address	
		Tallahassee, FL 32301		
		ra@zenbusiness.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For further	information co	oncerning this matter, please ca	alt:	
Filing Ang	gela		844 493-6249 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed is	s a check for th	ne 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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H2O Boat Co LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
he Articles of Organization for this Limited Liability Compan	ny were filed on 09/28/2022	and assigned
Torida document number 1.22000421301		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lia</u>	bility company here:	
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
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)		
3. If amending the registered agent and/or registered egistered agent and/or the new registered office address he		
		202 SE
Name of New Registered Agent:	******	2 00 ±
New Registered Office Address:		2022 OCT 17 SECRETASS TALLAHASS
	Enter Florida street address	Fig A I
	, Florida	0.21p C 670
New Registered Agent's Signature, if changing Registered Agent	t:	22 22

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 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>	<u>Address</u>	Type of Action
AMBR	Matthew Z Sims		
		4733 Huron Drive Pensacola, FL 32507-8782	■ Remove
			☐ Change
		□ Remove	
			Change
		□ Add	
			□ Remove
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		W112	Add
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			☐ Change

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E. Effective date, if other than the data (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be prior k does not meet the applic	to date of tiling or more than 90 c able statutory filing requireme	
If the record specifies a delayed e b) The 90th day after the recor	effective date, but no d is filed.	t an effective time, at 1	2:01 a.m. on the earlier of:
Dated October 6	2022		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00