Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: LAMADRID FINANCIAL SERVICES CORP

Account Number : 120200000059

Phone

: (954)727-9771

Fax Number

: (954)727-9773

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

2023

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YATCHMASTER HOSPITALITY LLC

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Certificate of Status	11
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

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Corporate Filing Menu

Help

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COVER LETTER

	vision of Corp			
CUD TEAT.		STER HOSPITALITY LLC		
SUBJECT:		Name of Limi	ted Liability Company	
The enclose	d Articles of A	Amendment and fee(s) are subt	nitted for filing.	
Please retur	n all correspon	ndence concerning this matter	to the following:	
		maria Rosa Folch Li	LAURADO	
			Name of Person	
		YATCHMASTER HOSPI	TALITY LLC	
			Firm/Company	
		1621 COLLINS AVENUE	APT 706	
			Address	
		MIAMI BEACH, FL 3313	9	
			City/State and Zip Code	
		rosafolchilaurado@gmail.co	om to be used for future annual report n	otification)
Car further	information c	oncerning this matter, please of		
		oncorring mo monor, posses	305 7219849	
MARIA R	OSA FOLCH		at ()	time Telephone Number
	Name o	f Person	Area Code Day	time Telephone (vulnoe)
Enclosed is	a check for th	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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed
	Iailing Addres		Street Address Registration	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

< HZ30000460683>

< H 23 000046068 3>

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YATCHMASTER HOSPITALITY	LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited L	ny as it now appears on ou lability Company)	r records.)	
The Articles of Organization for this Limited L. Florida document number £23000037335				and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
YACHT MASTER HOSPITALITY LLC				integration "I I C"
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designati	ion "LLC" or the abo	neviation C.L.C.
Enter new principal offices address, if applic	able:	N/A		
(Principal office address MUST BE A STREE				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or agent and/or the new registered office address.	registered office	N/A address on our record	s, <u>enter the nam</u>	e of the new regist
				202.
Name of New Registered Agent:	<u>N/A</u>			3 <u>F</u> EB
New Registered Office Address:		Enter Florida str	vel address	5 6 (=
		City	, Florida	Zip Code
New Registered Agent's Signature, if changing	Registered Agent	ï		. 50
I hereby accept the appointment as register provisions of all statutes relative to the pro	nor and comples	ree to act in this capa e performance of my o provided for in Chap	Mitch, and I am,	

If Changing Registered Agent, Signature of New Registered Agent

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.

≺ H23 000046068 37

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being ad or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
N/A			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Remove
			□Change
			DAdd
			□ Remove
			Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change

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		Signature of a member or authorized representative of a member

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