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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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 YACHTA YACHTA LLC

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APR 24 2023 T. LEMIEUX

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

pg 2 of 4

Yachta Yachta LLC		į.
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	vere filed on (04/03/2023	and assigned
Florida document number L23000152192		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the ab	breviation "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)		
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, <u>enter the nam</u>	e'of the new registered
		دين ح <u>ح</u>
Name of New Registered Agent:		<i>;</i>
New Registered Office Address:	Enter Florida street address	
	, Florida	`Zip Code'

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
MGR	Michael Andoniades	2202 N. Howard Ave.	
		Tampa, FL 33607	≘ Remove
			□Change
			□ Add
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ective date, if other that	n the date of filing:			(option	al)
ective date, if other than n effective date is listed, the date te: If the date inserted in the	te must be specific and ca	annot be prior to da	e of filing or more th	nan 90 days after fil	ng.) Pursuant to 605,020
cument's effective date on t	the Department of Sta	ite's records.	statutory ming rec	gunerius, en a	ne will not be nined.
	fective date, but not as	n effective time, a	it 12:01 a.m. on th	e earlier of: (b)	The 90th day after the
is filed.		2023			
is filed.		2023			
is filed.		887			
econd specifies a delayed effis filed. April 21st		887	representative of a	member	

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