12300440638

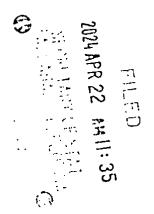
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COVER LETTER

TO:

	Registration Seet Division of Corpo		ŕ	•	,
sun irz	n De	ep south Doc	iks, uc		
SUBJEC	-1: <u> </u>		ited Liability Company		_
The encl	osed Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please re	turn all correspond	dence concerning this matter	to the following:		
		Joseph	D. NOVYI	5	
			Name of Person		
		Deep so	outh Docks	s.llc	
			Firm/Company		
		11001 Brig	Int Star CIY		
			Address		
		Tallanas	ssee, FL 3	2305	
			City/State and Zip Cod	_	_
			narine const to be used for future annua	ruction Egmail	.com
For furth	er information cor	ncerning this matter, please ca	all:		
J0	seph D.	Norris	a. 450 \	938 - 9391	
	Name of l		Area Code	938 - 9391 Daytime Telephone Num	ber
Enclosed	I is a check for the	following amount:			
∑ \$ 25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is e	Certif (nclosed) Certif	Filing Fee, ficate of Status & fied Copy final copy is enclosed)
	Mailing Address: Registration So Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations	Regist Divisi The C 2415 1	Address: tration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite hassee, FL 32303	e 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Deep south De	OCKS, LLC			
(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 Florida document number <u>L 2300440638</u> .	were filed on 09 21 23	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	lity company here:			
Wakulla marine constructi				
The new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC" or th	e abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	11001 Bright Sta	r cir		
(Principal office address MUST BE A STREET ADDRESS)	Tallanassee, Fr. 3	12305		
		2024		
Enter new mailing address, if applicable:	11001 Bright Stat	POY 👼 🔐 🔃		
(Mailing address MAY BE A POST OFFICE BOX)	Tallahassee FL	32305=		
B. If amending the registered agent and/or registered office ac	ddress on our records, enter the <u>r</u>	iame of the new register		
agent and/or the new registered office address here:	:	<u>U</u>		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florida	Zip Code		
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre	e to act in this canacity. I further	agree to comply with th		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
		 -	□Remove
			□Change
			□Add
			□Remove
			□Change
		·	□ Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			
			□Remove
			□Change

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(If an effective Note: 1:	the date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated _	April 1st 2024

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Typed or printed name of signee

Filing Fee: \$25.00