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COVER LETTER

	tration Section on of Corporations	
SUBJECT:	MART MARINE USA LLC	
Sobole 1.	Name of Limited Lia	bility Company
The enclosed A	Articles of Amendment and fee(s) are submitted	for filing.
Please return a	Il correspondence concerning this matter to the f	Ollowing:
	RANDY GOMEZ	
	:	Same of Person
	SMART MARINE USA LLC	
		Firm/Company
	7934 NW 105TH CT	
		Address
	Doral, FL 33178	
	City/randy@miamiyachting.net	State and Zip Code
	E-mail address: (to be use	ed for future annual report notification)
For further info	ormation concerning this matter, please call:	ed for future annual report notification)
RANDY GOM	EZ	786 201-9652
	Name of Person	Area Code Daytime Telephone Number
Enclosed is a c	heck for the following amount:	F. 5
■ \$25.00 Fil	Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

SMARI MARINE USA LLC	ited Liability Company or it now appear	re on our records \
(Mante of the Line	ited Liability Company as it now appea (A Florida Limited Liability Company)	is on our records.)
The Articles of Organization for this Limited I Florida document number	Liability Company were filed on	/08/2023 and assigned
This amendment is submitted to amend the fol	llowing:	
A. If amending name, enter the new name	of the limited liability company h	ere:
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
		-
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE		
Maning duaress MAT BE A FOST OF FICE	<u></u>	
		32.7
B. If amending the registered agent and/or	registered office address on our	records, enter the name of the new register
agent and/or the new registered office addr	ess here:	22 15
Name of New Registered Agent:	GOMEZ, RANDY	
New Registered Office Address:	7934 NW 105TH CT	3: 46
	Enter Flo	rida street address
	DORAL.	. Florida 33178
	City	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 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>	Address	Type of Action
AMBR	SANTOS, JOSE A		
		10969 NW 80TH LANE, MEDLEY, FL 33178	□Add
		10303 NW 601 II LANE. MEDLET, PC 55176	≡ Remove
			□Change
			□Add
			□Remove
			□Change
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E. Effective date, if other than the of (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicab	date of filing or more than 90 sle statutory filing requires	0 days after filing.) Pursuant to	603.0207
If the record specifies a delayed effective record is filed.	date, but not an effective tim	e, at 12:01 a.m. on the ear	:lier of: (b) The 90th day a	ifter the
January 17	2024			
Dated	,	- •		
	signature of a member or authori	and representative of a man	p.or	_