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#### COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

## **Division of Corporations** Vaca Home FL1 IIc SUBJECT: \_\_\_\_\_ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jeremy Bottau Name of Person Bottau Holdings LLC Firm/Company 3789 NW 46TH ST Address Miami, FL 33142 City/State and Zip Code accouting@american-marine.com E-mail address, (to be used for future annual report notification) For further information concerning this matter, please call: Jeremy Bottau 281.9999 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ■ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address:** Street Address: Registration Section Registration Section Division of Corporations

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company has been entered in the new name must be distinguishable and contain the words "Limited Liability Company," the entered 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 office address on our registered office add		<b>' &gt;</b>
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on  [A Florida document number 1.23000510266]  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company has been as a contain the words "Limited Liability Company." the second of the new name must be distinguishable and contain the words "Limited Liability Company." the second of the 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]  [A STREET ADDRESS]	``.	
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The new name must be distinguishable and contain the words "Limited Liability Company." the element 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 office address on our regent and/or the new registered office address here:  Name of New Registered Agent:	<u>ere</u> :	
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 office address on our regent and/or the new registered office address here:	designation "ELC" or the (	abbreviation "L.L.C."
Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our regent and/or the new registered office address here:		
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gent and/or the new registered office address here:		
gent and/or the new registered office address here:		
	ecords, <u>enter the nar</u>	me of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
Enter Flo	rīda street address	
	Florida _	Zıp Code

#### New Registered Agent's Signature, if changing Registered Agent:

Thereby 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	Jeremy Bottau	3789 NW 46th St	□Add
		Miami, FL 33142	≣Remove
			Change
Owner	BOTTAU HOLDINGS LLC	3789 NE 46TH ST	■Add
		MIAMI, FL 33142	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		-	□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□ Remove
			□Change

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D. If amending any other informs	ation, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	
	ust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) block does not meet the applicable statutory filing requirements, this date will not be listed as the
f the record specifies a delayed effecti- ecord is filed.	ve date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated NOVEMBER 27	2023
	The work of the same of the sa
	Signature of a member or authorized representative of a member
Ingary Datton	
Jeremy Bottau	Typed or printed name of signee

#### **COVER LETTER**

Tallahassee, FL 32314

	Registration Se Division of Cor					
SHRIFC	Vaca Home	FLI lic				
SUBJECT: Name of Limited Liability Company						
The enclo	osed Articles of	Amendment and fee(s) are subm	nitted for filing.			
Please re	turn all correspo	ndence concerning this matter to	o the following:			
		Jeremy Bottau				
			Name of Person			
		Bottau Holdings LLC				
	<del></del>					
		3789 NW 46TH ST				
			Address			
		Miami, FL 33142				
		accouting@american-marine				
For furthe	er information c	E-mail address: (to oncerning this matter, please cal	be used for future annual report not	lification)		
Jeremy B		, , , , , , , , , , , , , , , , , , ,	 786 281- <del>9999</del>			
Name of Person		at ()	ne Telephone Number			
Enclosed	is a check for th	ne following amount:				
□ <b>\$</b> 25.0	00 Filing Fee	S30.00 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		Street Address: Registration Se Division of Co The Centre of	rporations			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303