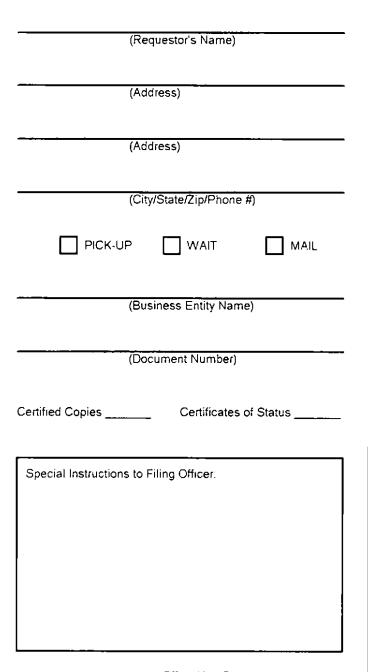
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Office Use Only



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2024 MAY - 1 PM 5: 21 SECRITARY OF STATE

COVER LETTER

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| SUBJECT: | ISLAND (| TATCH SEAFOOD LLC | |
|---------------------------------|---|---|---|
| <u></u> | Name of Lim | ited Liability Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Pier S. Bjorklund | | |
| | | Name of Person | |
| | Island Catch Seufood LLC | | |
| | | Firm/Company | |
| | 222 Lakeview Avenue, Ste | . 800 | |
| | | Address | |
| | West Palm Beach, FL 3340 |)] | |
| | | City/State and Zip Code | |
| | Advisor@islandcatchseafood.com | | |
| | E-mail address: (| to be used for future annual report i | notification) |
| For further information c | oncerning this matter, please c. | all: | |
| Pier S. Bjorklund | | at (561) 379-1220 | |
| Name o | (Person | Area Code Day | time Telephone Number |
| Enclosed is a check for the | he fallowing amount: | | |
| □ \$25.00 Filing Fee | - | El CSS DO Pillag Pass & | = \$60.00 pili p |
| E 527.00 rining rec | □ \$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) |
| | | | |
| Mailing Addres | | Street Address: | |
| Registration ! Division of C | | Registration Division of C | |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ISLAND CATCH SEAFOOD LLC

| (<u>Name of the Limited Liability Company as i</u> (A Florida Limited Liabilit | t now appear y Company) | rs on our records.) | | |
|---|----------------------------|----------------------------------|-----------------|-----|
| The Articles of Organization for this Limited Liability Company were lorida document number | filed on | January 19, 2024 | _ and assign | nec |
| his amendment is submitted to amend the following: | | | | |
| . If amending name, <u>enter the new name of the limited liability c</u> | ompany ho | ere: | | |
| ne new name must be distinguishable and contain the words "Limited Liability Cor | mpany," the d | esignation "LLC" or the abbre | rviation "L.L.C | |
| nter new principal offices address, if applicable: | | | 2[| |
| Principal office address MUST BE A STREET ADDRESS) | | | 124 1 | |
| | <u> </u> | · : | A Y | П |
| | | 333 | - - | |
| nter new mailing address, if applicable: | | \$65 \$80 \$70 | PH | П |
| | | S | (7) | フ |
| Mailing address MAY BE A POST OFFICE BOX) | | 77 | - ö- | |
| | | , <u>u</u> | 2 | |
| . If amending the registered agent and/or registered office addre | ss on our r | ecords, <u>ent</u> er the name o | of the new r | еg |
| gent and/or the new registered office address here: | | | | |
| | | | | |
| Name of New Registered Agent: | · - | | | |
| Niver Development (NCC) and Livery | | | | |
| New Registered Office Address: | Enter Flor | rida street address | | |
| | | | | |

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.

Cin

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 | Blue Catch Seafood Inc. | 222 Lakeview Avenue, Suite 800 | |
| | | West Palm Beach, FL 33401 | ■Remove |
| | | | Change |
| AMBR | Island Catch Group LLC | 222 Lakeview Avenue, Suite 800 | = Add |
| | | West Palm Beach, FL 33401 | □Remove |
| | | | □Change |
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| Note: If the | ate, if other than the da date is listed, the date must be date inserted in this block effective date on the Depa | does not meet t | the applicable st | of filing or more that atutory filing requ | (optiona n ⁹⁰ days after tilin irements, this da | t) g.) Pursuant to 605,0207 re will not be listed as |
| he record spec ord is filed. | ifies a delayed effective d | ate, but not an e | ffective time, at | 12:01 a.m. on the | earlier of: (b) | The 90th day after the |
| | April 24 | | 2024 | | | |
| Dated | | · | 平. / | | | |
| _ | Sig | nature of a memb | per or authorized r | epresentative of a m | ember | |
| | | | Pier S. Bjorkl | und | | |
| _ | | Type | ed or printed name | of signee | | |