To: 18506176383

Page: 1/4

Fax: 8134365206



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(((H240004104123)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

H 10: 4

**Enter: the email address for this business entity to be used for future

or ⊆ Sannual	l report	mailings.	Enter	only	one	ema
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BACKCOUNTRY BOATHOUSE LLC

Certificate of Status	0
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BACKCOUNTRY BOATHOUSE LLC

(A Florida Limited L	ability Company)	
The Articles of Organization for this Limited Liability Company vi Florida document number L24000157260	were filed on	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:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbr	eviation "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)		
		<u> </u>
B. If amending the registered agent and/or registered office a		
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	-	w
New Registered Office Address.	Enter Florida street address	
	Florida	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am fai rovided for in Chapter 605, F.S. Or, if	niliar with and this document is

If Changing Registered Agent, Signature of New Registered Agent

12/13/2024 07:40:23 PET . To: 18506176383 Page: 3/4 Fax: 8134365206

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	ST. JOHN. JOHN	43320 County Road 44	= Add
		Steamboat Springs, CO 80487	□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			Remove
			FAdd
			□Remove
			Change
			□Add
			LJRemove
		·	□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	_
	
	
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E. Effective date, if other than the date of filing:	605.0207 (3)(listed as the
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day accord is filed	ifter the
Dated December 13th 2024	
Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member	
Robin Jones Typed or printed name of signee	