L24000216913

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COVER LETTER

Division of Corporations							
SUBJECT:	L30 SAILING						
SUBJECT: Name of Limited Liability Company							
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.				
Please return	all correspond	dence concerning this matter	to the following:				
		Gyula Fisli					
	Name of Person						
	L30 SAILING, LLC						
			Firm/Company				
		5909 NW 71st Ter					
			Address	<u>-</u>			
		Parkland FL 33067					
City/State and Zip Code							
	fisligyula@gmail.com						
			to be used for future annual repo	ort notification)			
For further in	formation con	cerning this matter, please ca	all:				
Gyula Fisli			561 419-4.				
	Name of F	erson	at () Area Code	Daytime Telephone Number			
Enclosed is a	check for the	following amount:					
□ \$25.00 F	iling Fec	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

TO:

Registration Section

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

L30 SAILING, LLCMay 09, 2024 (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on May 09, 2024 ____ and assigned Florida document number 1.24000216913 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida City

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 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
MGR	REKASI, ILDIKO		□Add
		5909 NW 71ST TER PARKLAND, FL 33067	■Remove
			□Change
AMBR	REKASI, ILDIKO	5909 NW 71ST TER PARKLAND, FL 33067	= Add
			□Remove
			□Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			Change
			□Add
			Change
			☐Change :

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If 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 after the record is filed. Dated May 29 2024 Signature of a member or authorized representative of a member Gyula Fisli / Ildiko Rekasi

Filing Fee: \$25.00

Typed or printed name of signee