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## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

BHH MARINE, LLC 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: Brian Hagan Name of Person Firm/Company 7008 S Honors Dr Address Sioux Falls, SD 57108 City/State and Zip Code bhagan@hfgcompanies.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Brian Hagan Name of Person Enclosed is a check for the following amount: S25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

BHH MARINE, LLC

(Name of the Limited Liability Company as it now appears on our re2021 AUG 30 AH 9: 38

The Articles of Organization for this Limited Liability Compar	ny were filed on 08/01/	2024 SEGIATA TOP STATE	
Florida document number 1.24000339527			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ability company here:		
Vessel Vanguard, LLC			
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the desig	nation "LEC" or the abbreviation "LEC"	
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 agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	e address on our reco	rds, <u>enter the name of the new registered</u>	
•	Enter Florida street address		
		Florida Zip Code	
	•	Zip Code	
New Registered Agent's Signature, if changing Registered Agen			
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my s provided for in Cha	duties, and I am familiar with and pter 605, F.S. Or, if this document is	

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>	Name	Address	Type of Action
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			□Remove
			Change
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			□Remove
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ated August 28		2024			
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