

L24000385509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

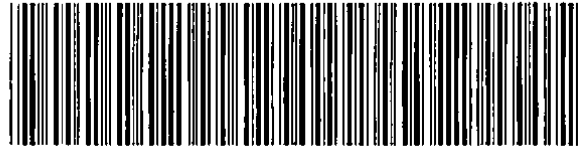
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/29/24--01024--020    ••25.00

**FILED**  
2024 DEC -9 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 18, 2024

ZARA BLAKE  
97289 PIRATES POINT ROAD  
YULEE, FL 32097

SUBJECT: ESTUARY MARKETING LLC  
Ref. Number: L24000385509



We have received your document for ESTUARY MARKETING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN  
Regulatory Specialist II

Letter Number: 524A00025177

# COVER LETTER

**Registration Section  
Division of Corporations**

**SUBJECT:** Estuary Marketing LLC  
 \_\_\_\_\_  
 Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

Use return all correspondence concerning this matter to the following:

Zara Blake  
 \_\_\_\_\_  
 Name of Person

\_\_\_\_\_  
 Firm/Company

97289 Pirates Point Road  
 \_\_\_\_\_  
 Address

Yulee, FL 32097  
 \_\_\_\_\_  
 City/State and Zip Code

zblake904@gmail.com  
 \_\_\_\_\_  
 E-mail address: (to be used for future annual report notification)

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**SECRETARY OF STATE**  
**TALLAHASSEE, FL**

For further information concerning this matter, please call:

Zara Blake   904           548-8649  
 \_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
 Name of Person   Area Code                               Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$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 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

Estuary Marketing, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned  
Florida document number L24000385509.

This amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

New name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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

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

Zip Code

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 Changing Registered Agent, Signature of New Registered Agent

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Removing Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MR = Manager

MBR = Authorized Member

<u>e</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<del>MBR</del>	Zara Blake	97289 Pirates Point Road, Yulee Fl 32097	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Rhonda Blake	97289 Pirates Point Road, Yulee Fl 32097	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Rem
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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TALLAHASSEE, FL

Effective date, if other than the date of filing: Sept 3, 2024 (optional)

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

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 document is filed.

Dated 09-01 2024

*Zara Blake*

Signature of a member or authorized representative of a member

Zara Blake

Typed or printed name of signee