(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)
PICK-UP WAIT	MAIL
(Business Entity Name)
(Document Number)	
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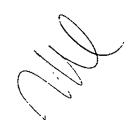


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SECRETARY OF STATE TALLAHASSEE, FL

2024 NOV -8 AM 10: 49



COVER LETTER

	ACHTS ADVENTURES LLC				
SUBJECT:					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	DINA AYOUB				
		Name of Person			
		Firm/Company			
	1100 NW NORTH RIVER	DR			
		Address			
	MIAMI, FL 33136		•	υ 2	
		City/State and Zip Code		B24 N ECR TAI	70
	E-mail address: (to be used for future annual report notif	lication)	OV -	
For further information of	concerning this matter, please c	all:		2024 NOV -8 AM 10: 49 SECRETARY OF STATE TALLAHASSEE, FL	LED
		at ()		110: L	U
Name o	of Person	Area Code Daytime	e Telephone Number	L 17E	
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional co)	of Status &	

Mailing Address:
Registration Section
Division of Corporations

P.O. Box 6327

Registration Section

Division of Corporations

TO:

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

MIAMI YACHT ADVENTURES	S LLC	
(Name of the Lin	ited Liability Company as it now appears of (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Florida document number 1.24000428524	Liability Company were filed on 10/01/	2024 and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here	
The new name must be distinguishable and contain the		mation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	
(Principal office address MUST BE A STRE	TET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC)		SECRETI TALLA
B. If amending the registered agent and/or agent and/or the new registered office additional agent agent and/or the new registered office additional agent	registered office address on our reco ress here:	ري (۲۰ ۱۳۱۱)
Name of New Registered Agent:	DINA AYOUB	AMID: 49. OF STATE SEE, FL
New Registered Office Address:	P. D. H	
	Enter Florida	strect address
	City	Florida Zip Cirle
	CHV	Zip Conv

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 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>	<u>Name</u>	Address	Type of Action
AMBR	DINA AYOUB	1100 NW NORTH RIVER DR	≡ Add
		MIAMI, FL. 33136	□Remove
			□Change
			□Add
			□Remove
			□ Change
			SECRETCHANGE
			SECRETORY OF STATES TALLAHASSEL, FL
			☐ Change
			□Add
			□Remove
			□Change
			□Add
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			□Change

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's effective da pecifies a dela	ate on the Depart	ment of Si	tate's records	S.					
Nov	3		202	<u>1</u> .					
	Sign	11 E	hember or aud	nortzen repres	sentative of a r	nember			
r	ve date is listed, he date insert 's effective da becifies a dela	we date is listed, the date must be some date inserted in this block does effective date on the Department of the Depart	ve date is listed, the date must be specific and the date inserted in this block does not make effective date on the Department of Signature of a figurature of a figurature of a figurature.	he date inserted in this block does not meet the applies effective date on the Department of State's records becifies a delayed effective date, but not an effective to the Nov 3 202 Signature of a member or auto-	re date is listed, the date must be specific and cannot be prior to date of filing the date inserted in this block does not meet the applicable statutor's effective date on the Department of State's records. Secifies a delayed effective date, but not an effective time, at 12:0 and the Department of a member or authorized representation. Abdul Rahman El	we date is listed, the date must be specific and cannot be prior to date of filing or more that he date inserted in this block does not meet the applicable statutory filing requires effective date on the Department of State's records. Decifies a delayed effective date, but not an effective time, at 12:01 a.m. on the NOV 3	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after the date inserted in this block does not meet the applicable statutory filing requirements, this is effective date on the Department of State's records. Secifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) NOV 3 2024 Signature of a member or authorized representative of a member Abdul Rahman El Makdah	date, if other than the date of filing:	date, if other than the date of filing: Coptional