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TALLAHASSEELES STATE

COVERLETTER

Registration Section Division of Corporations

JET TEK V JECT:	VATERSPORTS PALM BEAC	CH LLC	
	Name of Lim	ited Liability Company	
enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
e return all correspo	ondence concerning this matter	to the following:	
	Scott Sherrron		
		Name of Person	
		Firm: Company	
	2121 Broadway		
		Address	
	Riviera Beach, FL 33404		
	scott@jettekwatersports.com	City/State and Zip Code	
		to be used for future annual report notil	ication)
urther information of	concerning this matter, please ca	all:	
Sherron		908 216-5474	
Name o	r Person	at () Area Code Daytime	e Telephone Number
osed is a check for t	he following amount:		
325.00 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

RETURBES OF AMERICAN

TO ARTICLES OF ORGANIZATION OF

JET TEK WATERSPORTS PALM BEACH 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 11/01/2024 and assigned la document number L24000464485 imendment is submitted to amend the following: amending name, enter the new name of the limited liability company here: w name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." r new principal offices address, if applicable: cipal office address MUST BE A STREET ADDRESS) r new mailing address, if applicable: ing address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

Registered Agent's Signature, if changing Registered Agent:

why accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and state the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability any has been notified in writing of this change.

Cin

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

Straight Line Consulting Group LL West Palm Beach, FL 33407 Remove Change	<u>Name</u>	Address	Type of Action
□ Change □ Add □ Remove	Straight Line Consulting Group LL	5802 N Flagler Drive	
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