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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Name of Foreign Limited Liability Company
Dear Sir or Madam:
The enclosed application, certificate and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Daniel Ketter/Son Name of Person
Navtcal Options, LCC Firm/Company
P.O. Box 1
Ovange Brach, AL 3656 1. City/State and Zip Code
Dan @ Wautical Ottons, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Daw lette Son at (251) 979-0086 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILENG ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount: 12 \$25 Filing Fee

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION 1 (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Nautical Options, CCC
2. Jurisdiction of its organization: Alabama
3. Date authorized to do business in Florida: 4/21/2010
SECTION II (4-7 complete only the applicable changes)
4. New name of the limited liability company: No Charge (must contain "Limited Liability Company," "L.L.C.," or "L.L.C.," or "L.L.C.," or "L.C.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.") 5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: Need to all 2 Authorized persons
Brandon Rex 202 N. Reus St. Pensacola, FL 32501 FF F
Bylan Gwlnnyp 4511 Parkwood LN. W Mulle, FL 32578. 7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.
Signature of the authorized representative 0 Accept for All 549 tes
Signature of the authorized representative Pasistored Ascent for All States Pasistored Ascent for All States Resistored Ascent for All States Resistored Ascent for All States Resistored Ascent for All States Parter Neuticul Options (III) Typed or printed name of signee
Typed or printed name of signee

Filing Fee: \$25.00