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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

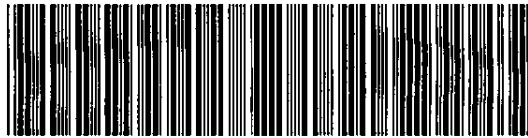
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EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SEA CAPITAL ADVISORS LLC
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:

J. FRANCES

Name of Person

ANDBANC WEALTH MANAGEMENT LLC

Firm/Company

1221 BRICKELL AVENUE, SUITE 1550

Address

MIAMI, FL 33131

City/State and Zip Code

JFRANCES@AWM.US.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

J. FRANCES

Name of Person

at (**302**)

962-4267

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

