## L15000163275

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## **COVER LETTER**

TO:	Registration Se Division of Cor			<del>"</del>		
CHID IC	SeedTrust	, LLC	·			
SUBJE	Name of Limited Liability Company					
The enc	losed Articles of	Amendment and fee(s) are subr	nitted for filing.			
Please r	eturn all correspo	ndence concerning this matter t	o the following:			
		George Adam Winder				
			Name of Person			
		SeedTrust, LLC				
			Firm/Company			
		515 North Flagler Dr., Su	ite 350			
Address				<del></del>		
West Palm Beach, FL 33401						
			City/State and Zip Code	····		
		adam@seedtrustescrow.c	om o be used for future annual report notifica	ation)		
For furt	her information c	oncerning this matter, please ca		,		
	f Brockschmidt	, , , , , , , , , , , , , , , , , , ,	352 870-9945			
		f Person	at ()	elephone Number		
	Name	r r etson	Area Code Daytine 1	стерияте гчиност		
Enclose	d is a check for th	ne following amount:				
<b>■</b> \$25	5.00 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 Addres		<u>Street Address:</u> Registration Secti	on		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

SeedTrust, LLC

(Name of the Lim	ted Liability Company as it now appears on our reco (A Florida Limited Liability Company)	rds.)
The Articles of Organization for this Limited I Florida document number L15000163275	iability Company were filed on 09/25/2015	and assigned
This amendment is submitted to amend the fol	lowing:	
(Name of the Limited Liability Company as it pow appears on our records.)  (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on O9/25/2015 and assigned Florida document number 15000163275  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation J.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)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registers gent and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:  Edward Brockschmidt  Storth Flagler Dr., Suite 350  Enter Florida street address  West Palm Beach  The Agent Agent and Agent and Agent and Agent and Brockschmidt  Storth Flagler Dr., Suite 350  Enter Florida street address  West Palm Beach		
The new name must be distinguishable and contain the	words "Limited Liability Company," the designation "Ll	LC" or the abbreviation JL.L.C."
Enter new principal offices address, if appli	cable:	- 10 31
Principal office address MUST BE A STRE.	ET ADDRESS)	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		<u> </u>
	BOX	
**	• •	er the name of the new registers
Name of New Registered Agent:	Edward Brockschmidt	
New Registered Office Address:		ress

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
MGR	Roland S. Salloum, COO	515 North Flagler Dr., Suite 350	
		West Palm Beach, FL 33401	Remove
			□Change
MGR	Edward BrockSchmidt, CFO	515 North Flagler Dr., Suite 350	
		West Palm Beach, FL 33401	■ Remove
			El Change
AMBR	The Winder Family Irrevocable Trust	129 Bryce Ln	■Add
		Jupiter, FL 33458	□Remove
			□Change
AMBR	The BrockSchmidt Family Irrevocable	Trust 12160 189th Court N.	■Add
		Jupiter, FL 33478	□Remove
			□Change
AMBR	The E.H.B. Irrevocable Trust	2270 Corporate Circle, Suite 200	• Add
		Henderson, NV 89074	□Remove
			□ Change
AMBR	George Adam Winder, CEO	129 Bryce Ln	🗀 Add
		Jupiter, FL 33458	□Remove
			■ Change

Effective date, if other than the date of filing:  (optional)  (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 602 More:  (The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.  (The second specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after distilled.  (Dated ASSA ZGA ZGA ZGA ZGA ZGA ZGA ZGA ZGA ZGA ZG	the date of filing:	-	
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