Florida Department of State

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Division of Corporations

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Account Number : 120030000043

Phone : (800)342-9856

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S. 20 - 1273

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

SEACA	Y LLC		
(Name of the Limited Liability Compar (A Florida Limited L	iv as it now appears inbility Company)	on our records.)	
The Articles of Organization for this Limited Liability Company vi Florida document number L21000338882			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company her	보 7	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the dea	ignation "LLC" or the obt	previation "L.L.C."
Enter new principal offices address, if applicable:	_ 501 EAST	CAMINO REAL E	BOULEVARD
(Principal office address MUST BE A STREET ADDRESS)		DCA RATON, FL 3	
		MARINA SLIP 5	S ASS
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			R-6 PM
B. If amending the registored agent and/or registered offi- registered agent and/or the new registered office address here:	ce address on o	un records, enter t	he name of the ne
Name of New Registered Agent:			
New Registered Office Address:			
	Bater Florida	street address	
		, Florida	
New Registered Agent's Signature, if changing Registered Agent:	City		Zip Code
hereby accept the appointment as registered agent and agree	to got in this cam		

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 Registored Agent, Signature of New Registered Agent

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112/10/00/894413

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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					
Title	Nume	Address	Type of Action		
			Add		
			□ Remove		
			D Change		
			D Add		
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			D Add		
			C Remove		
			Change		

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D. If amen	ding any other information, en	ter change(s) here:	(Attach additional sheets, If necessary.)
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	date, if other than the date of f redote is listed, the date must be specific tio date inserted in this blook does n is offective date on the Depurtment		(optional) Me of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(be statulory filing requirements, this date will not be listed as the
f the record b) The 90	d specifies a delayed effective that the specifies a delayed effective the record is file.	re date, but not ar ed.	n effective time, at 12:01 a.m. on the earlier of:
Dated	MARCH 6	2024	·
	Signature o	Lament a	d ropresentative of a member
		LAWRENCE	
•		Typed or printed na	une of signee