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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·		
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SECRETARY OF STATE
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C. LEWIS

SEP 8 2009

EXAMINER

## **COVER, LETTER**

TO: Registration S Division of Co	Section proporations	•	•	
oun inor.	SEA	VIEW, LLC		
SUBJECT:		ited Liability Company		
	of Amendment and fee(s) are sulpondence concerning this matter	-		
r lease return an corresp	ondence concerning this matter	to the following.		
		Harry K. Bender		
		Name of Person		
	Bender Bender & Chandler, P.A.			
		Firm/Company		
	5915 Ponce de Leon Blvd., Suite 63			
		Address		
	Cora	al Gables, Florida 33146		
	h	City/State and Zip Code		
	E-mail address: (	enderh520@aol.com to be used for future annual report notificat	ion)	
For further information	concerning this matter, please c	all:		
Harry K. Bender at ( 305 ) 662-1133 x 22				
Name	of Person	Area Code & Daytime To	elephone 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)	
	LING ADDRESS: tration Section	STREET/COURIER Registration Section	ADDRESS:	

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2009 SEP -4 PM 1: 37

	SEAVIEW, LLC	SECRET	ARY OF STATE		
( <u>Name of the Limited</u>	SEAVIEW, LLC  Liability Company as it now appear  Florida Limited Liability Company)	s on our records.	55EF-1120111		
The Articles of Organization for this Limited L			and assigned		
Florida document number L0400005	4311				
This amendment is submitted to amend the foll	lowing:				
A. If amending name, enter the new name o	f the limited liability company her	<u>e</u> :			
	CR SEAVIEW, LLC				
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Compa	ny," the designation "I	LLC" or the abbreviation		
Enter new principal offices address, if applic	cable:				
(Principal office address MUST BE A STREE	ET ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)				
B. If amending the registered agent and/registered agent and/or the new registered or		our records, <u>enter t</u>	he name of the new		
Name of New Registered Agent:	Harry K. Bender				
New Registered Office Address:	5915 Ponce de Leon Blvd., Suite 63				
Enter Florida street address					
	Coral Gables	, Florida	33146		
	City		Zip Code		

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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> **Address Type of Action** Remove ☐ Remove ☐ Add Remove Add Remove □Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 31 Dated Signature of a member or authorized representative of a member Ralph Velocci Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00