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COVER LETTER

TO: Registration Section
Division of Corporations

Only CTAO One OF OTTY MAINING THE NT //

SUBJECT: SEA STAR PROPERTY MANAGEMENT, LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Florian Bergmann
Name of Person

Sea Star Property Management, LLC

Firm/Company

3106 NW 16th PL

Address

Cape Coral FL 33993

City/State and Zip Code

Florian @ Sea Starvacation rentals. com

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

For further information concerning this matter, please call:

FLorian Bergmann at (239) ZZZ-0901

Name of Person

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) S60.00 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 Address:

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

Sea Star Property Management, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/23/2009 and assigned Florida document number L09000028208

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

3106 NW 16+ PL Cape Coral, FL 33993
3106 NW 16th PL Cape Coral, FL 33993
dress on our records, <u>enter the name of the new registere</u>

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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, thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of Jen Registered Agent

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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

<u>Title</u>	Name	Address	Type of Action
President	Kathleen A Heming	3031 Via Rialto St	□Add
	0	Ft. Myers, FL 3390S	
			□Change
Vice Residen	t Florian R Begman	in 3106 NW 16th PL Cape Coral, IL 3399	□Add
		Cape Coral, IL 3399	} □Remove
			X Change
			□Add
			□Remove
			□Change
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Effectiv	ve date, if other than the date of filing:
lf an effe <u>Note:</u> I	ctive 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 605,020 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as not's effective date on the Department of State's records.
record d is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated _	July 6 2020.
	Signature of a member or supported representative of a member Florian R Bergmann
	T(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	FLorian R Bergmann

Filing Fee: \$25.00