L09000070321

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MacSea	Group, LLC		
		ited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Eugenio F Jaime		
		(Name of Person)	
	Dry Dock Logistics G	roup, LLC	
		(Firm/Company)	
	6528 US HWY 301 S	South Suite 107	
		(Address)	
	Riverview, FL 33578		
		(City/State and Zip Code)	
For further information co	oncerning this matter, please ca	all:	
	movining and manor, product of		
Eugenio F Jaime		at (813) 600-7229	
(Name o	(Name of Person) (Area Code & Daytime Telephone Number)		Felephone Number)
Enclosed is a check for th	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MacSea Group, LLC (Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number <u>L0900070321</u>	ity Company were filed on 07/20/2010	_ and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the designation "LLC	C" or the abbreviation
B. If amending the registered agent and/or r registered agent and/or the new registered office	egistered office address on our records, <u>enter the</u> <u>address here</u> :	name of the new
Name of New Registered Agent:	Ä	2 =
New Registered Office Address:	(Enter Florida street addre	8 77
	(Enter Florida street dauge	36) 22 37 55 [T
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	tered Agent:	T O
the provisions of all statutes relative to the prope	gent and agree to act in this capacity. I further agree or and complete performance of my duties, and I am ged agent as provided for in Chapter 608, F.S. Or, if i	familiar with and

(If Changing Registered Agent, Signature of New Registered Agent)

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 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> Name | <u>Address</u> **Type of Action** LAMAS, LEONARDO ECON 6528 S. US HWY. 301 STE 107 MGRM Add RIVERVIEW, FL 33578 Remove Add Remove Add Remove Add Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ Signature of a member or authorized representative of a member Eugenio F Jaime, Member Typed or printed name of signee

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Filing Fee: \$25.00