

LD9000072887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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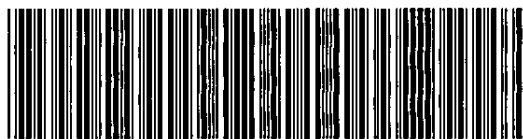
(Business Entity Name)

(Document Number)

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FILED
10 MAR 11 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Collins MAR 11 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Seaweed Bath Co., LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Adam Grossman
Name of Person
The Seaweed Bath Co., LLC
Firm/Company
101 S. Ft. Lauderdale Beach Blvd #1103
Address
FL. Lauderdale, FL 33316
City/State and Zip Code
adam@seaweedco.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Grossman at (305) 240-4072
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) ☐ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 25, 2010

ADAM GROSSMAN
101 S. FT. LAUDERDALE BEACH BLVD., #1103
FT. LAUDERDALE, FL 33316

SUBJECT: THE SEAWEEED BATH CO., LLC
Ref. Number: L09000072887

We have received your document for THE SEAWEEED BATH CO., LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 1 of the Amendment is not legible and acceptable for imaging. I am enclosing a new Page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 910A00004714

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

The Seaweed Bath Co., 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 July 29, 2009 and assigned
Florida document number L09000072887

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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 registered agent and/or the new registered office address here:

Name of New Registered Agent:

Paul B. Siegel

New Registered Office Address:

101 S. Fort Lauderdale Beach Blvd., #1103

Enter Florida street address

Fort Lauderdale

Florida

33316

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, I hereby 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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

FILED
10 MAR 11 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated March 8 2010

Adam Grossman

Signature of a member or authorized representative of a member

Adam Grossman

Typed or printed name of signee