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FLORIDA DEPARTMENT OF STATE

September 14, 2016

MATTHEW BENJAMIN 4472 STAGHORN LANE SARASOTA, FL 34238

SUBJECT: SOUTHEAST TRADEWINDS, LLC

Ref. Number: L09000074151

We have received your document for SOUTHEAST TRADEWINDS, 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):

The registered agent must sign accepting the designation.

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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 716A00019642

CHANGED BEING

COVER LETTER

		tration Sec ion of Corp		·			
	5	SOUTHEAS	ST TRADEWINDS, LLC				
SUBJEC				ited Liability Company			
The encl	osed A	Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn a	ll correspor	dence concerning this matter	to the following:			
			MATTHEW BENJAMIN				
				Name of Person		三百	
			SOUTHEAST TRADEWI	NDS, LLC		S S	'n
				Firm/Company		23	
			4472 STAGHORN LANE				FILED
				Address		23 PN C 14 ANY OF STATE ASSECTED ORDER	5
			SARASOTA, FL 34238			3M =	
			MATT@SETRADES.COM	City/State and Zip Code	······································		į .
			E-mail address: (to be used for future annual report no	tification)	,	
For furth	er info	rmation co	ncerning this matter, please ca	ill:			
MATTH	IEW B	BENJAMIN		206 306-4500 at ()			
		Name of	Person		ne Telephone Number		
Enclosed	is a c	heck for the	e following amount:				
\$25.0	00 Fili	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
·		Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations a 6327 see, FL 32314	STREET/COUR Registration Section Division of Corporation Building 2661 Executive Control Tallahassee, FL 3	orations Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	City		Zip Code
	SARASOTA	Florida	34238
New Registered Office Address:	4472 STAGHORN	LANE la street address	
Name of New Registered Agent:			
registered agent and/or the new registered office ac		our records, <u>enter</u>	the market of the fit
B. If amending the registered agent and/or reg	vistered office address on a	our records, enter	
Maning maress MAT BL A FOST OFFICE BOA			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SARASOTA FL		23 lm
Enter now mailing address if annihables	4472 STAGHOR	N LANE	SEP 23
<u>(Principal office address MUST BE A STREET AD)</u>	DRESS) SARASOTA FL	34238	TS 5
Enter new principal offices address, if applicable:	4472 STAGHOR	N LANE	
The new name must be distinguishable and contain the words "L	imited Liability Company," the des	signation "LLC" or the al	breviation "L.L.C."
A. If amending name, enter the new name of the li	mited liability company her	<u>'e</u> :	
This amendment is submitted to amend the following			
Florida document number 1.09000074151	•		
The Articles of Organization for this Limited Liability	Company were filed on JUL	Y 31, 2009 .	and assigned
(A Flor	bility Company as it now appears rida Limited Liability Company)	on our records.)	
SOUTHEAST TRADEWINDS, LLC	HILL C		

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 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 Registered Agent, Signature of New Registered Agent

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MATTHEW BENJAMIN	4472 STAGHORN LANE	
		SARASOTA FL 34238	□ Remove
			Change
MGRM	SHANNON BENJAMIN	4472 STAGHORN LANE	
		SARASOTA FL 34238	☐ Remove
			Change
			Add
			☐ Remove
			Classics
			FILE SE 23 All SSE
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fective date, if other than the da m effective date is listed, the date must be	specific and cannot be prior	to date of filing or mor	e than 90 days after 101ng) Pursuant to 605.02
ote: If the date inserted in this block current's effective date on the Department.	does not meet the applic	able statutory filing	requirements, this date	will not be listed
ourient o orroom to date on the bepar	inon or sale 3 resorts.	•		
record specifies a delayed el	fective date, but no	ot an effective tin	ne. at 12:01 a.m.	on the earlier
The 90th day after the record	is filed.		,	
CONTRACTOR OF	2017			
september 7	, 2016	· ·		
Unall.	nature of a member or author			

Page 3 of 3

Filing Fee: \$25.00