#109000086206

(Requestor's Name)		
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(City (Chata 77) or 17)		
(City/State/Zip/Phone #)		
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(Document Number)		
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K.SALY EXAMINER JUN 1 9 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SURJECT: Seastry Holdings, 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:

Nicole J. Huesmann

Name of Person

Nicole J. Huesmann P.A.

Firm/Company

150 Alhambra Circle, Suite 1150

Address

Coral Gables, Florida 33134

City/State and Zip Code

njhuesmann@olsrhh.com

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

For further information concerning this matter, please call:

Nicole J. Huesmann

305₈₅8-0220

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



द्रा ८ च्या हुनामकूट मार्थने.

Seastry Holdings, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Plorida Limited Liability Company)

The Articles of Organization for this Limited Liability Compa	my were filed on 09/08/2009	and assigned	
Florida document number L0900086206			
This amendment is submitted to amend the following:		• •	
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and end with the words "L.L.C."	imited Liability Company," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:		_	
(Principal office address MUST BE A STREET ADDRESS)			
		to the residence	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	<u></u>		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h Name of New Registered Agent:		,	
,,		नामकाको न्यान स्वतं व्यवस्थितः -	
New Registered Office Address:	Enter Florida street address		
	Florida	Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Ager	<u>ıt:</u>		
I hereby accept the appointment as registered agent and a the provisions of all statutes relative to the proper and con			
accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	s provided for in Chapter 608, F.S. C	r, if this document is	
If C	nanging Registered Agent, Signature of New	Registered Agent	
Paga	•		
i age	e 1 of 3		

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 Title Title Name <u>Address</u> Type of Action **198 NW 37 AVENUE MGRM** Patricio Louis Cordero ✓ Add MIAMI, FL 33125 Remove <u>ass or anch Manager</u> Add Profit Liberto Remove Add __ Kenieve . <u>4.44-14.7.27</u> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	_
	–
Dated June 12 2013	i Ars
A B	•
Signature of a member or authorized representative of a member	•
Ana Cordero	••
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00