Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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(((H140000709763)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ADVOCATE CONSULTING LEGAL GROUP, PLLC

Account Number : I20090000001 Phone : (239)213-0066 Fax Number : (239)213-0698

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4 HAR 24 AM 6: 46

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Sea Level Aviation, 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:

Brigette Harms

Name of Person

Advocate Consulting Legal Group

Firm/Company

3073 Horseshoe Drive South, Ste 210

Address

Naples, FL 34104

City/State and Zip Code

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

For further information concerning this matter, please call:

Brigette Harms

_____ Br (_____

9,213-0066

Davtime Telephone Number

Enclosed is a check for the following amount:

Name of Person

☐ \$25,00 Filing Fee

S30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certifled 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

ADVOCATE CONSULTING Fax: 239+213+0698

Mar 24 2014 05:28pm

(((H14000070

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Company as it now apper	ars on our records.)		
The Articles of Organization for this Limited Liab Florida document number L09000118071	-		_ and assigned	
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	he limited liability company h	ere:		
Sea Level Management, LLC				
The new name must be disringuishable and end with the wo	rds "Limited Liability Company," th	e designation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicab	ele:			
(Principal office address MUST BE A STREET	ADDRESS)		· · · · · · · · · · · · · · · · · · ·	
		<u> </u>	<u> </u>	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	·		
		1		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address o	n our records, enter in	e name of the	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florida	7:- Cada	
	City		Zip Code	

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

Sea Level Aviation, LLC

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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 i being filed to merely reflect a change in the registered affice 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

Page 1 of 3

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Mar 24 2014 05:28; (((H140000

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Mana-Authorized Member being added or removed from our records:

Title	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			□ Add
			☐ Remove
			□ Add
			Remove
			~
			_ □ Remove
			D Add
			□ Remove
			Add

ADVOCATE CONSULTING Fax:239+213+0698 Mar 24 20	114 05:29pa
(((H1400 D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.))00 7 097
E. Effective date, if other than the date of filing:	
Dated March 24 2014	
Signature of a member or authorized representative of a member	_
Gregory M. Delaney Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00