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COVER LETTER

TO: Registration S Division of Co			
	CUSA, LLC.		
SUBJECT:		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Thorsten Loest		
		Name of Person	
	SEAFAIR USA, LLC.		
		Firm/Company	
	9901 NW 106th Street - St	uite 5	
		Address	
	Medley, FL 33178		
		City/State and Zip Code	
	thorsten.loest@seafairgroup	o.com to be used for future annual report notifi	cation)
For further information	concerning this matter, please c	·	
Thorsten Loest		at () 507-0150 Area Code Daytime	
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

SEAFAIR USA, 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 09/01/2010 and assigned Florida document number 1.10000091872 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: n/a The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abhieviam "L.L.C." 9901 NW 106th Street - Suite 5 Enter new principal offices address, if applicable: Medley, FL 33178 (Principal office address MUST BE A STREET ADDRESS) 9901 NW 106th Street - Suite 5 Enter new mailing address, if applicable: Medley, FL 33178 (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: n/a Name of New Registered Agent: 9901 NW 106th Street - Suite 5 New Registered Office Address: Enter Florida street address

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.

Medley

If Changing Registered Agent, Signature of New Registered Agent

. Florida ³³¹⁷⁸

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			Change
			□ Add
		·	Remove
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		July 30, 20)18	, ,	• •
e <mark>ctive date, if other</mark> effective date is listed, t	ne date must be specif	ic and cannot be prio	r to date of filing or n	iore than 90 days afte	ional) r filing.) Pursuant to 605.020
<u>te:</u> If the date inserted ument's effective date				g requirements, th	is date will not be listed a
record specifies a he 90th day after			ot an effective	time, at 12:01	a.m. on the earlier
Miami ed		07/12/2018	3		
eu			notice in presentative		

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Typed or printed name of signee

Filing Fee: \$25.00