UDDOSSIO

(Re	equestor's Name)
(Ad	ddress)
(Ac	ddress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Ви	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
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SECRETARY OF STATE
TALL AHASSEE TO ORDA

OCT 2 3 2015 S. YOUNG

COVER LETTER

	Registration Se Division of Cor			
SUBJEC	SE FLORII	DA VENTURES, LLC		
SOBOLO		Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		LOU FUOCO		
			Name of Person	16-16-18-18-18-18-18-18-18-18-18-18-18-18-18-
		SE FLORIDA VENTURE	S, LLC	
			Firm/Company	
		772 US HIGHWAY ONE,	SUITE 200	ALLAR B
			Address	12 TA
		NORTH PALM BEACH,	FL 33408	SERVICE D
		LFUOCO@FUOCO.COM	City/State and Zip Code	TARY OF STATE ASSEE, FLORIDA
		-	to be used for future annual report notific	eation) Sm 3
For furth	er information co	oncerning this matter, please co	all:	
SHERI A	ANDREWS		561 626-0400 at ()	
	Name of	f Person		Celephone Number
Enclosed	l is a check for th	ne following amount:		
\$25.0	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)
	Registr	ING ADDRESS: ation Section n of Corporations ox 6327	STREET/COURIE Registration Section Division of Corporat Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SE FLORIDA VENTURES, LLC				
(<u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appears on our recor da Limited Liability Company)	<u>ds.</u>)		
he Articles of Organization for this Limited Liability of Iorida document number L10000108590	Company were filed on	and assigned		
This amendment is submitted to amend the following:				
. If amending name, enter the new name of the lin	nited liability company here:			
e new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:	<u> </u>			
Principal office address MUST BE A STREET ADD	RESS)	三直当五		
		SSE 2 F		
		18 2 0		
nter new mailing address, if applicable:		To ST W		
Mailing address MAY BE A POST OFFICE BOX)		ST 23		
Tuning dutitess MAT DL AT OST OFFICE BOX				
. If amending the registered agent and/or registered agent and/or the new registered office ad		ls, enter the name of the		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street addre	ess		
		lorida		
	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 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>	Address	Type of Action
MGMR	VINNY FERRARA	772 US HIGHWAY ONE	🗖 Add
		SUITE 200	■ Remove
		N. PALM BEACH, FL 33408	☐ Change
MGMR GIULIANI BOTTICELLI	GIULIANI BOTTICELLI	772 US HIGHWAY ONE	□ Add
		SUITE 200	■ Remove
		N.PALM BEACH, FL 33408	<u> </u>
MGMR RICH LONGOBARDI	RICH LONGOBARDI	772 US HIGHWAY ONE	CORP. FAdd
		SUITE 200	22 LE CARREMOVE
		N.PALM BEACH, FL 33408	UNITED Change
MGMR DAVE ZAJAC	DAVE ZAJAC	772 US HIGHWAY ONE	■ Add
		SUITE 200	□ Remove
		N. PALM BEACH, FL 33408	□ Change
			□ Add
			□ Remove
			☐ Change
			Add
			Remove
			Change

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	He did
	OR W
	DA DA
Effective date, if other than the date of filing:	(optional)
It an effective date is listed, the date must be specific and cannot	ot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) he applicable statutory filing requirements, this date will not be listed as the
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's	
document's effective date on the Department of State's the record specifies a delayed effective date, The 90th day after the record is filed.	but not an effective time, at 12:01 a.m. on the earlier of:
document's effective date on the Department of State's the record specifies a delayed effective date, The 90th day after the record is filed.	but not an effective time, at 12:01 a.m. on the earlier of:
document's effective date on the Department of State's the record specifies a delayed effective date, The 90th day after the record is filed.	s records.

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00