11000055853

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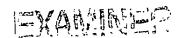
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COVER LETTER .

TO:	Registration Sect					
	Division of Corpo	rations				
	·	(50 1/-				
SUBJE	ECT:	SEA VIET	v Homes LLC ed Liability Company			
	٦	Name of Limit	ed Liability Company			
			· #			
The end	closed Articles of Ar	nendment and fee(s) are sub-	mitted for filing.			
Please	return all correspond	lence concerning this matter	to the following:			
		•				
		De	nnis! Gossett	-		
			Name of Person			
				•		
		SEA	VIEW HOMES Firm/Company	LLC		
			Firm/Company			
		325	Sw 25+5 Address	PLACE		
			Address			
		CAPE	City/State and Zip Code	3399/		
			City/State and Zip Code			
			a 055 ett jr @ A00	- com		
		E-mail address: (to	e used for future annual report not	ification)		
For fur	ther information con	cerning this matter, please ca				
i Oi Tui	uici intomiation con	cerning tins matter, picase of				
^	1	. #	. 200 . 700	0021		
$-\nu$	PENNIS GO	erson '	at (<u>239</u>) <u>789</u> Area Code & Dayti	me Telephone Number		
	Name of F	CISOR	Alea Code & Dayii	nie retephone rumber		
Enclose	ed is a check for the	following amount:		. / .		
□\$ 25	.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,		
دعواليا	oo rumg ree	Certificate of Status	Certified Copy	Certificate of Status &		
			(additional copy is enclose	ed) 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 SECRETARY OF STATE ARTICLES OF ORGANIZATION ISION OF CORPORATIONS **OF**

11 JUN 27 AM 1 53

SEA V	I'EW HOMES LLC							
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	mpany as it now appears on our records.) ited Liability Company)							
The Articles of Organization for this Limited Liability Company were filed on May 11+4, 2011 and assigned								
Florida document number <u>L //000055853</u> .	,							
This amendment is submitted to amend the following:								
A. If amending name, enter the new name of the limited	liability company here:							
The new name must be distinguishable and end with the words "I "L.L.C."	Limited Liability Company," the designation "LLC" or the abbreviation							
Enter new principal offices address, if applicable:								
(Principal office address MUST BE A STREET ADDRESS	<u>S)</u>							
Fator non-mailing address if ambiachlas								
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)								
Maning duaress MAT BE A 1051 OF FICE BOX								
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, <u>enter the name of the new</u> here:							
Name of New Registered Agent:								
New Registered Office Address:								
	Enter Florida street address							
	, Florida							
New Registered Agent's Signature, if changing Registered Age	City Zip Code							
New Registered Agent's Signature, it changing Registered Age	<u>;ent;</u>							
the provisions of all statutes relative to the proper and co	agree to act in this capacity. I further agree to comply with omplete performance of my duties, and I am familiar with and t as provided for in Chapter 608, F.S. Or, if this document is ffice address, I hereby confirm that the limited liability							

If Changing Registered Agent, Signature of New Registered Agent

lf amer <u>or Man</u>	ng the Managers or Managing Members on our records, enter the title, name, and address of each Japazer ing Member being added or removed from our records:						
MGR = MGRM	lanager Managing Member						
<u>Title</u>	<u>Name</u>	Address	Type of	/ ction			
Mern	Trisha Monk	375 SW 25+4 PLACE CAPE LURAL, FL 3399	Add Remov	 1 8			
	Irisha Monk		Add Remov	# 3			
<u> YGRM</u>	Dennis Gosse	# 325 SW 25+4 Place CAPE CORA: FE 33991	Add Remov	 a u			
			Add Remov	ve			
			Add Remov	11			
			Add Remov	i);			
D. If a	ending any other information, enter	er change(s) here: (Attach additional sheets, if necessary.)	11 JUN 27	SECRETAR DIVISION OF (
			AM 11:53	Y OF STATE CORPORATION			
Dated .	JUNE 216+ Drish Me	2011. Me Mo	- - 	Si			
	TRISHA MON	Typed or printed name of signee	<u>C00550</u>	2#			
	, , , , , , , , , , , , , , , , , , ,	Page 2 of 2					

Filing Fee: \$25.00