	len m
LIDDO	1324SCe
(Address)	500255294595
(City/State/Zip/Phone #)	01/10/1401012002 **100.00
(Document Number) Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	An 4:46 PE STACE PE DE DA
Office Use Only	

.

UNII 1 4 2014

0.02067

COVER LETTER	
TO: Registration Section Division of ( ) porations	
SUBJECT: SEA CREST PARTNERS LLC	
Name of Limited Liability Company	
The enclosed Articles is Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
TIFFANY WILSON	
Name of Person	
ESO EQUITY GROUP LLC	
Firm/Company	
150 COCOA ISLES BLVD #202	
Address	
COCOA BEACH FLORIDA 32931	
COCOA BEACH FLORIDA 32931 City/State ard Zip Code TWILSON@ESOEQUITYGROUP.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TIFFANY WILSON	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check fer the following amount: ■ \$25.00 Filing Fee ↓ □\$30.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 Filing Fee,	
Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: STREET/COURIER ADDRESS:	
Registration Section     Registration Section       Division of Corporations     Division of Corporations	
P.O. Box 6327 Tall-Lassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

· \_· \_ · \_ ·

- ---

- -

- -

· \_ -

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

# SEA OREST PARTNERS 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 <u>11/22/2011</u> and assigned Florida document number <u>L11000132986</u>

This amendment is submitted to amend the following:

## A. If amending natio, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new princips! offices address, if applicable:	150 COCOA ISLES BLVD #202; 🦛 🛶		-
(Principal office address MUST BE A STREET ADDRESS)	COCOA BEACH FLORIDA	AN	
i.	<b>32931</b> 생길	10	I
	در است. است و بر	л. Т	TT.
Enter new mailing address, if applicable:	150 COCOA ISLES BLVD #202	÷	States
(Mailing address May BE A POST OFFICE BOX)	COCOA BEACH FLORIDA,		
	32931		

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

	•	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida street address
		, Florida
	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 608, F.S. Or, if this document is being filed to mere? reflect a change in the registered office address, I hereby confirm that the limited liability company has been potified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

 If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

.

MGR = Manager MGRM = Managin ; Member

Title	<u>Nan e</u>	Address	Type of Action
MGRM	TI RZAH LISSAK LLC	150 COCOA ISLES BLVE #202	2 🔲 Add
	•	COCOA BEACH FLORIDA	Remove
		32931	
MGR	ESO EQUITY GROUP LLC	150 COCOA ISLES BLVD #202	2 🖌 Add
* Chan	ge adaress #	COCOA BEACH FL	Remove
		32931	
			Add
			Remove
			Remove
			Add
	2 2		Remove
		· · · · · · ·_	-
	··········		Add
		f	Remove

ł

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

. \_\_\_\_\_ , Dated NOVEMBER 25 2013 Signature of a member or authorized representative of a member ORI TAL Typed or printed name of signee Page 3 of 3 Filing Fee: \$25.00 2014 JAN 10 AM 4: 46 а 1 1 1

ŝ