L12000052076

(Red	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Registration Se Division of Cor			**		
Seascape E SUBJECT:	nterprises, LLC				
*	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Laurie George				
		Name of Person			
	Seascape Enterprises, LLC				
	Firm/Company				
	206 150th Avenue				
		Address			
	Madeira Beach, Florida 33	708	- April		
	_	City/State and Zip Code		2016	Have and
	Laurie@SeascapeNOW.com	n to be used for future annual report notific		NG	
For further information of	oncerning this matter, please co	•	ASSET C	.a	
Laurie George		727 403-5820 at ()		T بب	
Name o	f Person		Telephone Number	53	
Enclosed is a check for t	he 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 Fili Certificate Certified (additional of	e of Stati Copy	

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

Seascape Enterprises, LLC				
(<u>Name of the Lim</u>	ited Liability Compa (A Florida Limited I	ny as it now appears Liability Company)	on our records.	
The Articles of Organization for this Limited I lorida document number L12000052076	Liability Company	were filed on Apri	1 12, 2012	and assigned
his amendment is submitted to amend the fol	lowing:			
. If amending name, enter the new name	of the limited liab	ility company her	<u>e</u> :	
he new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the des	signation "LLC" or the abbr	eviation "L.L.C."
nter new principal offices address, if appli	cable:	206 150th Avenu	e	
Principal office address MUST BE A STREET ADDRESS)		Madeira Beach, FL 33708		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		206 150th Avenue Madeira Beach, Florida 33708		
			75	=
3. If amending the registered agent and egistered agent and/or the new registered of	l/or registered of office address here	ffice address on	our records, enter-tl	ne name of the
Name of New Registered Agent:	Laurie George	· · · · · · · · · · · · · · · · · · ·		i w
New Registered Office Address:	206 150th Aver		Car Sa	(-)
		Enter Florid	la street address	
	Madeira Beach		, Florida ³³⁷⁰	8
		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
Owner	Laurie George	206 150th Avenue Madeira Beach,	Add
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ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing.	(optional)
te: If the date inserted in this block does not meet the applicable statutor	
cument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effect he 90th day after the record is filed.	tive time, at 12:01 a.m. on the earlier
9/9/2014	
ted 8/8/2016	
	mtotive of a mambar
Signature of a member of authorized representation	anative of a incliner

Page 3 of 3

Filing Fee: \$25.00