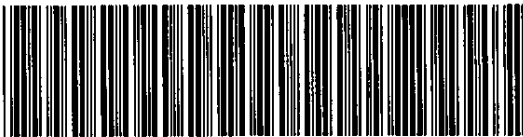


L12000071310



100260725451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

06/02/14--01024--021 **30.00

FILED
2014 JUN -2 PM 3:43
STATE OF FLORIDA
TALLAHASSEE

JUN 05 2014
D. BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SEASCAPE CERAMIC IMAGES LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEN DROUVILLO
Name of Person
TROPIC BREEZE IMAGES
Firm/Company
13120 SW 92 AOE # 614
Address
Miami, FLA 33176
City/State and Zip Code
SEASCAPE1934@HOTMAIL.COM
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

KEN DROUVILLO at (786) 488-0289
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)

MONEY ORDER #
9548401470

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

2014 JUN - 2 PM 3:43
FILED
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SEA SCAPE CERAMIC IMAGES 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 5/25/2012 and assigned Florida document number L12000071310

This amendment is submitted to amend the following:

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

TROPIC BREEZE IMAGES LLC

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 principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

PO BOX 561985
MIAMI, FLA 33256

(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:

Name of New Registered Agent:

N/A

New Registered Office Address:

N/A

Enter Florida street address

N/A

City

Florida

Zip Code

FILED
JUN - 2 PM 3:43
SECRET FLORIDA

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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

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

N/A

E. Effective date, if other than the date of filing: N/A (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 5/29/2014

Ken DeLuca
Signature of a member or authorized representative of a member

KEN DRUVILLO
Typed or printed name of signer

FILED
2014 JUN -2 PM 3:43
TALLAHASSEE FLORIDA