

LIB 0000 28668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

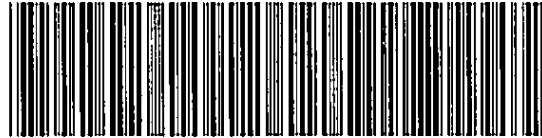
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100342434501

03/30/20--01018--027 \*\*113.75

2020 APR 22 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 23 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SEA-DEUCED 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:

RICHELLE BLAIR  
Name of Person

Firm/Company

8815 WEST ORCHID ISLAND CIRCE  
#402 Address

VERO BEACH, FL 32963  
City/State and Zip Code

RICHELLE.BLAIR@SBCGLOBAL.NET  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHELLE BLAIR at ( 440 ) 212-5965  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount: See below

☐ \$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)

\* CHECK IN AMOUNT OF \$113.75 ALREADY RECEIVED  
BY THE DIVISION OF CORPORATIONS.

Mailing Address:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

\* SEE LETTER NUMBER 290A00007617 ATTACHED  
DATED APRIL 9, 2020

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

SEA-DEUCED 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 FEB. 25, 2013 and assigned Florida document number L13000028668

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

(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:

New Registered Office Address:

*Enter Florida 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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	STEWART ROSE	1275 WINDING OAKS CIRCLE EAST VERO BEACH, FL 32963	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	SIDNEY ROSE	1275 WINDING OAKS CIRCLE EAST VERO BEACH, FL 32963	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	BRENDEN WETHERTON	1440 WINDING OAKS CIRCLE WEST VERO BEACH, FL 32963	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	DIANE WETHERTON	1440 WINDING OAKS CIRCLE WEST VERO BEACH, FL 32963	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	MICHAEL KARFOPOULOS	8775 WEST ORCHID ISLAND CIRCLE VERO BEACH, FL 32963	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	ANNE KARFOPOULOS	8775 WEST ORCHID ISLAND CIRCLE VERO BEACH, FL 32963	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

2020 APR 22 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2020 APR 22 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Richelle Blair  
Signature of a member or authorized representative of a member

RICHELLE BLAIR  
Typed or printed name of signee

**Filing Fee: \$25.00**