

L13000075751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

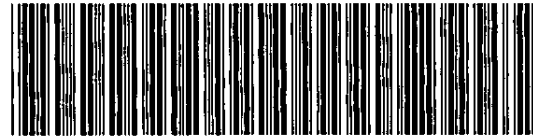
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SEAPORT CAPITAL INVESTMENTS 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:

Alfredo Cabral

Name of Person

Alfredo E. Cabral P.A.

Firm/Company

250 NE 25th Street, Suite # 1709

Address

Miami, Florida 33137

City/State and Zip Code

ac.cpa@live.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alfredo Cabral

Name of Person

at **305 926-5724**

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)

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

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 DIVISION OF CORPORATIONS

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

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	THE RIVER BRIDGE CAPITAL, CORP	250 NE 25TH STREET, # 1709	<input type="checkbox"/> Add
		MIAMI, FL 33137	<input checked="" type="checkbox"/> Remove
MGR	Avidia Capital Investments LLC	250 NE 25th Street	<input checked="" type="checkbox"/> Add
		Suite # 1709	<input type="checkbox"/> Remove
		Miami, Florida 33137	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Add
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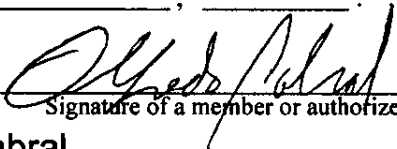
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Four horizontal lines for amending information.

Dated November 15, 2013



Signature of a member or authorized representative of a member

Alfredo Cabral

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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