K13000130785

(Re	questor's Name)	-
(Ad	dress)	
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(Cit	y/State/Zip/Phone	: #)
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(Bu	siness Entity Nan	ne)
(Dc	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Division of C			
	Marina, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Daniel Duggan		
		Name of Person	
	Seagate Marina, LLC		
		Firm/Company	<u></u>
	3600 Hamlet Drive		
		Address	
	Delray Beach, FL 33445		
		City/State and Zip Code	<u> </u>
	dduggan@seagatedelray.co		
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	itheation)
Daniel Duggan		561 498-7601	
Namo	of Person	at () Area Code Daytin	ne 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 Addr		Street Address:	vetion
Registration Division of	Corporations	Registration So Division of Co	
P.O. Box 6.	327	The Centre of	Tallahassee
Tallahassee	, FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 HAY 19 PM 12: 22

Seagate Marina, 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 $\frac{09-16-2013}{1}$ ____ and assigned Florida document number 1,13000130785 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 _, Florída __ Cin

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 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>	Name	Address	Type of Action
VP	Brian Mahoney	3600 Hamlet Drive	
		Delray Beach, FL 33445	□Remove
			□Change
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Effective date, if other than the date of filing: I an effective date is listed, the date must be specific and cannot be prior to date of filing or m Note: If the date inscreed in this block does not meet the applicable statutors (File	optio	onal) Glina y Dominio	405 020
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this	date will no	t be listed a:
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record specifies a delayed effective date, but not an effective time, at 12:01 a.m. of is filed.	on the earlier of th	Y Th. OALL :	1
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Pated 5/9 til ()			
Dated 5/9/il			
DatedSignature of Interniber or authorized representative	_		