

L130000140344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

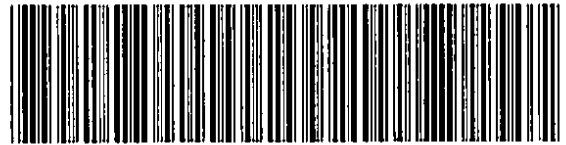
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SEA SHORE GIFTS, 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:

MAARIT SUVI LAMPING

\_\_\_\_\_  
Name of Person

SEA SHORE GIFTS, LLC

\_\_\_\_\_  
Firm/Company

508 N. DIXIE HIGHWAY, SUITE 1

\_\_\_\_\_  
Address

LANTANA, FLORIDA 33462

\_\_\_\_\_  
City/State and Zip Code

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

For further information concerning this matter, please call:

MAARIT SUVI LAMPING

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

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 Address:**

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

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

SEA SHORE GIFTS, 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 OCTOBER 4, 2013 and assigned  
Florida document number L13000140344.

This amendment is submitted to amend the following:

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

N/A

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)

508 N. DIXIE HIGHWAY, SUITE 1

LANTANA, FLORIDA 33462

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

(Mailing address MAY BE A POST OFFICE BOX)

508 N. DIXIE HIGHWAY, SUITE 1

LANTANA, FLORIDA 33462

**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:

MAARIT SUVI LAMPING

New Registered Office Address:

508 N. DIXIE HIGHWAY, SUITE 1

*Enter Florida street address*

LANTANA

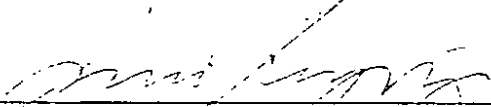
*City*

Florida 33462

*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	MAARIT SUVI LAMPING	508 N. DIXIE HIGHWAY, SUITE 1	<input checked="" type="checkbox"/> Add
		LANTANA, FLORIDA 33462	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TIMOTHY FRANK LAMPING	508 N. DIXIE HIGHWAY, SUITE 1	<input checked="" type="checkbox"/> Add
		LANTANA, FLORIDA 33462	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	MARJORIE A HAMLIN	508 N. DIXIE HIGHWAY, SUITE 1	<input type="checkbox"/> Add
		LANTANA, FLORIDA 33462	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	PAUL HAMLIN	508 N. DIXIE HIGHWAY, SUITE 1	<input type="checkbox"/> Add
		LANTANA, FLORIDA 33462	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

N/A

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated           FEBRUARY 2           2021

MAARIT SUIVILAMPING

Typed or printed name of signee

**Filing Fee: \$25.00**