

L14000003102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

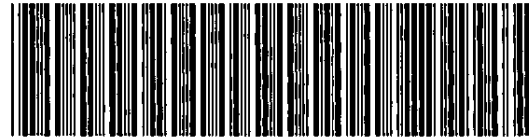
(Business Entity Name)

(Document Number)

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2014 FEB 24 P 12:29
FEB 24 2014
T. L. H. S. R. T. L. H. S. R. T. L. H. S. R.

B. BOSTICK

FEB 25 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SEAVALLEY 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:

Diana Collins

Name of Person

Incorp Services, Inc.

Firm/Company

2360 Corporate Circle Suite 400

Address

Henderson, NV 89074

City/State and Zip Code

managedcompliance@incorp.com

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

For further information concerning this matter, please call:

Diana Collins

Name of Person

at **702 866-2500**

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

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

SEAVALLEY INVESTMENTS 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 01/07/2014 and assigned
Florida document number L14000003102

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 end with 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)

E.A. Creque Building, Main Street

Road Town, Tortola

British Virgin Islands

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

E.A. Creque Building, Main Street

Road Town, Tortola

British Virgin Islands

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

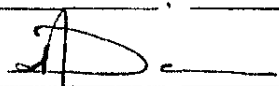
MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated January 30, 2014

✓ 

Signature of a member or authorized representative of a member

Neva Dasent

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2014 FEB 24 PM 12:29
CLERK OF COURT
JUDICIAL DISTRICT OF NEBRASKA
COUNTY OF SHERIDAN