L14000008450

(Requ	uestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Docu	ıment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	
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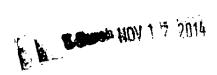
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TALLAHASSEE, FLAND



COVER LETTER

Division of C			
SUBJECT: Miami I	Mega Yach Club, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.	
	pondence concerning this matter	_	
	Jose M. Chanfrau, I	v	
		Name of Person	
	Jose M. Chanfrau, I	V PA	
		Firm/Company	
	6701 Collins Avenue	e, Normandy Room	
		Address	
	Miami Beach, FL 33	141	
		City/State and Zip Code	<u> </u>
	jchanfrau@josechan	fraupa.com to be used for future annual report	
For firther information	concerning this matter, please c	•	nonneanon)
Jose Chanfrau, IV		at ()	
Name	of Person	Area Code Da	ytime 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)
	LING ADDRESS:	STREET/COU Registration Se	JRIER ADDRESS:
Divisi	on of Corporations 30x 6327	Division of Col Clifton Buildin	rporations

Taliahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Miami Mega Yach Club, L						
(Name of the Limi	ted Liability Comp (A Florida Limited	any as it now appears (Liability Company)	on our records.)			
The Articles of Organization for this Limited L Florida document number L14000008450	Liability Company	y were filed on <u>Jan</u> i	uary 15, 2014	and assig	med	
This amendment is submitted to amend the foli	lowing:					
A. If amending name, enter the new name of	f the limited lial	bility company here	;			
Sea Vault Partners, LLC						
The new name must be distinguishable and end with the	words "Limited Lia	bility Company," the de-	signation "LLC" or the ab	breviation "L.I	C."	-
Enter new principal offices address, if applie	cable:	N/A		 1		
(Principal office address MUST BE A STREET ADDRESS)					77	_
		and a few transfer to the			<u>8</u> _	
Enter new mailing address, if applicable:		N/A		ARY B	<u> </u>	En exemple
(Mailing address MAY BE A POST OFFICE BOX)				reference i	Ĭ.	
				PAR S)))	J
B. If amending the registered agent and registered agent and/or the new registered or			ur records, <u>enter tl</u>	he name of	the r	new
Name of New Registered Agent:	N/A					_
New Registered Office Address:	N/A					
		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

<u>Title</u>	Name	Address	Type of Action
		N/A	□ Add
			□ Remove
		N/A	
			□ Remove
		N/A	TALLANDV
			14 NOV 10 SPM 1:25 SECRETARY SEET. FLORIDA
·		N/A	STAIL 25
			□ Remove
		N/A	
			□ Remove
		N/A	Add
			_ □ Remove

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	/A
_	
(The offec	te date, if other than the date of filing:
Dated_	10/28/14
	Signature of a member of authorized representative of a member
	Jose M. Chanfrau, IV Esq. as authorized representative of Jose Garcia, member.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

TAILLAHASSEE, FLORIDA