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| (Rec                      | juestor's Name)   |   |
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| PICK-UP                   | WAIT              | MAIL                                    |
| (Bus                      | siness Entity Nan | ne)                                     |
| (Doc                      | cument Number)    | · · · · · · · · · · · · · · · · · · ·   |
| Certified Copies          | Certificates      | s of Status                             |
| Special Instructions to F | Filing Officer:   | -                                       |
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S. PRATHER

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: Sea Life Aquatics 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:   |
| Melissa Hall Name of Person   |
| 1090 RoseHa Firm/Company  |
| 1090 Rosetta Dr<br>Address  |
| Deltona Fl 32725 City/State and Zip Code  |
| E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| Mellssa Hall  Name of Person  at (386) 314-9360  Area Code  Daytime Telephone Number  |
| Enclosed is a check for the following amount:   |
| \$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$\$ Certificate of Status & Certified Copy (additional copy is enclosed)\$\$\$ 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

| Name of the Limited Liability Compan<br>(A Florida Limited Li  | ny as it now appears on our records.)                            |
|--|--|
| The Articles of Organization for this Limited Liability Company via Florida document number 15000 169 784.  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liabil | 5. 5. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.                     |
| The new name must be distinguishable and contain the words "Limited Liability  | ity 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)   | 1871 N. Nova Rd<br>Holly Hill Fl 32117                           |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   |  |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here   | Tice address on our records, <u>enter the name of the new</u> e: |
| Name of New Registered Agent:  |  |
| New Registered Office Address:   | Enter Florida street address                                     |
|  | , Florida  |
| 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>     | Address             | Type of Action |
|--------------|-----------------|---------------------|----------------|
| AMBR         | Michael Vail    | 1871 N. Nova Rd     | <b> Z</b> Add  |
|              |                 | Holly HIII F1 32117 | □ Remove       |
|              |                 |                     | Change         |
| HIMBR        | Jassica Hartman | 1871 N. Nova Rd     | <b>p</b> Add   |
|              |                 | Holly Hill Fl 3211  | □ Remove       |
|              |                 |                     | Change         |
| <del>.</del> |                 |                     |                |
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