

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sea Breeze Association Management 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:

✓ Jeremy Snyder

Name of Person

Sea Breeze Association Management LLC

Firm/Company

45 Sugar Sand Lane, Suite C

Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

jeremy@pandhandlerentalco.com

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

For further information concerning this matter, please call:

✓ Jeremy Snyder

850

534-0024

at (_____) _____

Name of Person

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 Stat
Certified Copy
(additional copy is en)

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

TO
ARTICLES OF ORGANIZATION
OF

Sea Breeze Association Management LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

The Articles of Organization for this Limited Liability Company were filed on 1/8/2016

Florida document number L16000003827

2019 SEP 16 P
SECRETARY OF
TALLAHASSEE, FL

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 abbrevi

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 registered agent and/or the new registered office address here:

✓ Name of New Registered Agent:

Jeremy Snyder

✓ New Registered Office Address:

45 Sugar Sand Lane, Suite C

Enter Florida street address

Santa Rosa Beach

City

Florida 32459

Zip

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 provisions of all statutes relative to the proper and complete performance of my duties, and I am famili accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if thi being filed to merely reflect a change in the registered office address, I hereby confirm that the limited company has been notified in writing of this change.

XX 
If Changing Registered Agent, Signature of New Register

or removed from our records:

MGR = Manager

AMBR = Authorized Member

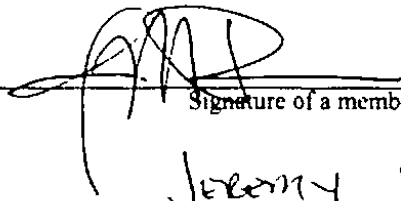
Title	Name	Address
MGR	Jeremy Snyder	183 E. Shallows Drive Santa Rosa Beach, FL 32459
AMBR	Burke Denny	8967 E. Co. Hwy. 30A Inlet Beach, FL 32461
AMBR	Gordon Tarver	45 Sugar Sand Lane, Ste. C Santa Rosa Beach, FL 32459

Lined area for text entry.

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 prior to date of filing or more than 90 days after filing.) Pursu
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n
document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on th
(b) The 90th day after the record is filed.

X Dated _____ . _____ .

X X  _____
Signature of a member or authorized representative of a member

X _____
Typed or printed name of signee