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04/22/16--01004--011 \*\*25.00

APR 22 2016 S. YOUNG

## **COVER LETTER**

Division of Corporations					
SUBJECT: SES Fund 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:					
Paul Melson					
Name of Person					
Firm/Company					
5741 NE 22 Terrace					
Address					
++ Lunderdale, LL 33308					
City/state and Zip Code					
Physical Action of the second					
For further information concerning this matter, please call:					
Paul Melson 11,754, 214 2022					
Name of Person Area Code Daytime Telephone Number					
Enclosed is a check for the following amount:					
S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)  S60.00 Filing Fee 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**

SES Fund	LLC	
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on ou isbility Company)	r records.)
The Articles of Organization for this Limited Liability Company of Florida document number	were filed on 211	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	TALLA
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	604 L	uke Elizabeth Do
(Principal office address MUST BE A STREET ADDRESS)	<u>winter</u>	Hours, FL 33384
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>	5741 F16	NE JUSTEN under dele, FL 33308
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:		records, enter the name of the new
New Registered Office Address:	Enter Florida stree	et address
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	•	

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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
May	Scott Saterbo	604 Luke Elizabeth I	DAdd
		Winter Huven, FL	☐ Remove
			34 ☐ Change
Mer	Paul Melson	5741 NE JAME TE.	•
* <b> </b>		Fortlanderdule, FL	- 25
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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	annalist	
	<u> </u>	
		TS:
	16 MAR 22	CARE
		38.E.c
	M 9: 7	FLOS
	_ 29	(12) 13-
E. Effective date, if other than the date of filing: 4/10/20/6 (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.) Pursuant to the Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records.	605.0207 (3)(b) isted as the	
if the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the early). The 90th day after the record is filed.	rlier of:	
Dated Apr. 1 10 th Zolb.		
Signature of a member or authorized representative of a member		
Erik Saterbo Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00