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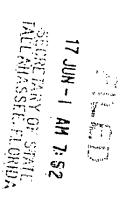
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
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COVER LETTER

	egistration Section Section of Corp			
CUDIECT	SEA & SAN	ND, LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclos	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please retu	irn all correspoi	ndence concerning this matter	to the following:	
		Stuart Grossman		
		Art and a state of the state of	Name of Person	
		Levine Kellogg Lehman S	chneider + Grossman LLP	
			Firm/Company	
		201 South Biscayne Boule	vard, 22nd Floor	
		and the second s	Address	· · · · · · · · · · · · · · · · · · ·
		Miami, FL 33131		
			City/State and Zip Code	
		sig@lklsg.com		
		E-mail address: (to be used for future annual report notific	ation)
For further	r information co	oncerning this matter, please ca	all:	
Stuart Gro	ossman		305 403-8788 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed i	s a check for th	e 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

SEA & SAND, LLC		
(Name of the Limite	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia	ability Company were filed on 10-11-16	and assigned
lorida document number L16000187874		
his amendment is submitted to amend the follo	wing:	
. If amending name, enter the new name of	the limited liability company here:	
he new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Inter new principal offices address, if applica	ble:	
Principal office address MUST BE A STREET	TADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE <u>A POST OFFICE E</u>	BOX)	
3. If amending the registered agent and/o	or registered office address on our records, en	ter the name of the
egistered agent and/or the new registered off	ice address here:	7 Z
		50 E
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		TO 2
-	Enter Florida street address	7
	, Florida	<u> 22 en</u>
•	Cin	Zin 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 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
MGR	Sarah Nilsen	95 North County Road	
		Palm Beach, FL 33480	□ Remove
			Change
			Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove
			☐ Change
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Effective date	e, if other than th	e date of fili	ng:			(optio	nal)		
fan effective da Note: If the da	tte is listed, the date mate inserted in this later than the later on the later than the later t	ust be specific a block does not	nd cannot be p meet the ap	plicable statu	filing or more than tory filing requi	90 days after f	iling.) Pursu	ant to 69 of be li	05.0201 sted as
	pecifies a delayed day after the re			not an eff	ective time,	at 12:01 a.	m. on th	e ear	lier o
Dated May 31	I		2017						
,			/ //						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00