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COVER LETTER

Seastar Property Holdings, LLC SUBJECT: 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: Stephen Johnson Name of Person Seastar Property Holdings, LLC Firm/Company 2822 54th Ave S, Suite 173 Address St Petersburg, FL 33712 City/State and Zip Code sjohnson@seasidepropertysolutions.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Stephen Johnson Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed).

MAILING ADDRESS:

TO:

Registration Section **Division of Corporations**

> 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

Seastar Property Holdings, LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our rorida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liabilit Florida document number 1.16000221006	y Company were filed on 12/6/16	and assigne
This amendment is submitted to amend the following	ı:	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u> <u>-</u>
(Principal office address MUST BE A STREET AD	DDRESS)	19
		<u> </u>
Enter new mailing address, if applicable:		19 JCT 15 PM 6: 29
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(Mailing address MAY BE A POST OFFICE BOX)		29
B. If amending the registered agent and/or re registered agent and/or the new registered office a	~·	cords, <u>enter the name of th</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
		_, 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 wind 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 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name Stephen M Johnson and Sarah F	<u>Address</u>	Type of Ac
	Johnson		
			Remove
			☐ Change
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Trective date, if other than the date of filing: (optional) 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. In the foliate. If the date inserted in this block does not meet the applicable statutory tiling requirements, this date will ocument's effective date on the Department of State's records. a record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on The 90th day after the record is filed. ated October 9	
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October 9 7019	the ear
sted October 9	
Salah Manha	
Sarah Manha	
Signature of a member of authorized representative of a member	
Stephen Johnson and Sarah Johnson	

The current Mgr is listed as "Stephen M Johnson and Sarah F Johnson LIVI" and we simply need it

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Filing Fee: \$25.00