117000057809

(Re	equestor's Name)	
(Ad	idress)	
(Ac	ddress)	
(Ĉi	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nan	ne)
(Do	ocument Number)	
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DEC 09 2019 S. YOUNG



November 25, 2019

HELENA GIL S SEAS LLC 1455 N TREASURE DRIVE APT 6J MIAMI, FL 33141

SUBJECT: 8 SEAS LLC Ref. Number: L17000057809

We have received your document for 8 SEAS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 419A00024079

Shelia H Young Regulatory Specialist II

FC - 6 Pr 3: 1

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	2 s	EAS LLC.	
SUBJECT:		ted Liability Company	··· <u>-</u> ··-
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	HELE	Name of Person	-
	8 sē	AS LLC Firm/Company	
	1455 N.7	REASURE DR.	162
	Miami	FL 33141 City/State and Zip Code	
		o be used for future annual report notifi	
For further information c	concerning this matter, please ca	itt:	
4 F (F	NA GIL	at (<u>205)</u> 205	2175
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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 (auditional 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 FILE

8 SE	AS LLC 19 DEC -6 PH 1:56
	ompany as it now appears 6h durirecords.) (A.13. ited Liability CompanyALLAHASSEE, FLORIDA
The Articles of Organization for this Limited Liability Comp Florida document number <u>L1700057809</u> .	pany were filed on $3/13/2017$ and assigned
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 abbreviation "L.L.C,"
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRES)	1455 N. TREASURE DR. #63
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1455 N. TREASURE DR. \$65 MIAMI, EL 33141
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	ed office address on our records, enter the name of the new here:
Name of New Registered Agent:	HELENA GIL
New Registered Office Address: 1455	N. TREASURE DR. P.PT 6 Z
	$\frac{\text{MiAMi}}{\text{Constant}} = \frac{33141}{\text{Controls}}$

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
116R	HARTA ARELLANO	168 SE let Stret	□ Add
		⊠(Remove	
		Miami FL 33131	Change
			Add
			☐ Remove
			☐ Change
			D Add
		Remove	
		□ Change	
 ·			
			☐ Remove
		·	☐ Change
			Add
		□ Remove	
			☐ ('hange
			
		□ Remove	
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, (f necessary.)
ARTICLE II
Street address of principal office Ts: 1455 N. TREASURE DR #6-15
1455 N TREASURE DR #6-1
i e e e e e e e e e e e e e e e e e e e
Miami FL 3314! L'avira adores or orinipar orice is:
1455 N. TREASURE DR #6]
MIAMI FL 33141
ARTICLE III
SSEAS IS OWNED BY: HELENA GIL I'Sn'
E. Effective date, if other than the date of filing: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated 12/2/2019
Signature of a member or authorized representative of a member
Signature of a member of authorized representative of a member
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00