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COVER LETTER

TO:	Registration Se Division of Cor					
SUBJ	SEEBEAN,	LLC				
SUBJ	EC1:	Name of Lim	Name of Limited Liability Company			
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		Ernest W. Sturges, Jr., Esq				
			Name of Person			
	Goldman, Tiseo & Sturegs, P.A.					
	Firm/Company					
	701 JC Center Court, Suite 3					
	Address Port Charlotte, Florida 33954 City/State and Zip Code					
		esturges@gtslawfirm.com		· · · · · · · · · · · · · · · · · · ·		
		E-mail address: (to be used for future annual report notif	ication)		
For fu	rther information c	oncerning this matter, please c	all:			
Ernes	t W. Sturges, Jr., E.	sq.	941 625-6666 at ()			
	Name o	f Person		Telephone Number		
Enclo	sed is a check for th	he following amount:				
\$2	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)		
	***	WG ADDDEGG	OTD DET (COUDIN	ED ADDRESS.		

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

SEEBEAN, LLC	
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records. Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on June 7, 2017 and assigned
Florida document number L17000123932	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ited liability company here:
The new name must be distinguishable and contain the words "Limi	ited 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 ADDR	RESS)
	Ŷ.,
	Ta Lake
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	CONTRACTOR AND
	OR III
B. If amending the registered agent and/or regist registered agent and/or the new registered office addi	tered office address on our records, enter the name of the ne ress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address .
	, 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 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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	James G. Kauffman	P.O. Box 624	■ Add
		Richland, Washington 99352	☐ Remove
			Change
MGR	Ernest G. Sturges	P.O. Box 624	Add
		Richland, Washington 99352	■ Remove
			□ Change
			Add
			Remove
			Add FLOR DA
			☐ Change
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			☐ Remove
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		June 7, 2	017			•	
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e: If the date inserted in this blo	ock does not	meet the app	licable statut	ory filing requ	rements, this d	ate will no	t be list
iment's effective date on the De	pariment of	State's recor	as.				
ecord specifies a delayed ne 90th day after the reco	effective	date, but i	not an effe	ctive time,	at 12:01 a.r	m. on the	e earli
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Filing Fee: \$25.00