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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT M/ (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	MAIL	
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COVER LETTER

TO: Registration Division of C					
ero irzer.	SEA ENDEAVOL	JRFLEET, LLC			
SUBJECT:		ted Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub-	nitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	HENRY RUIZ				
		Name of Person			
	H & L TAX ACCOUNTIN	G SERVICES			
Firm/Company					
	14331 SW 120 STREET	SUITÉ 105			
		Address	·		
		City/State and Zip Code			
	HENRYRUIZ@LIVE.COM				
	E-mail address: (t	o be used for future annual report notif	ication)		
For further information	i concerning this matter, please ca	all:			
HENRY RUIZ		305 752-4230 at ()			
Name	e of Person	Area Code Daytime	e Telephone Number		
Enclosed is a check for	r the following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

TO:

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

	CNICE	A1 // 1				^
SEA	ENDE	Ανυι	JKFL	1 .	LL	U

(Name of the Limited Liability Company as it now appears on our records.)

(1	(A Florida Limited Liabi	lity Company)	
The Articles of Organization for this Limited L Florida document number L18000114967	iability Company we	re filed on MAY 07, 2018	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability	company here:	
SEA ENDEAVOUR FLEET, L.L.C.			
The new name must be distinguishable and contain the	words "Limited Liability C	Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if appli	cable: _	12 (201
(Principal office address MUST BE A STREA	ET ADDRESS)	— ; ;;;	T.
		÷.	
	_		N
		<u> </u>	PP III
Enter new mailing address, if applicable:	_		
(Mailing address MAY BE A POST OFFICE	<u> (BOX)</u>		}
		•	u :
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	office address here:	address on our records, enter	the name of the nev
New Registered Office Address:	14331 SW 120 S	FREET SUITE 105	
New Registered Office Address.		Enter Florida street address	
	MIAMI	, Florida ³³	3186
		Cuy	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete per istered agent as prov registered office add	formance of my duties, and I am vided for in Chapter 605, I .S. Or,	familiar with and if this document is
	If Changin	Registered Agent, Signature of New Re	egistered 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
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een.	tive date, if other than the date of filing: (optio	mali		
an c	tive date, if other than the date of filing: (option flective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after	nar) filing.) Pu	rsuant to	605.020
ote	If the date inserted in this block does not meet the applicable statutory filing requirements, this			
ocu	nent's effective date on the Department of State's records.			
e r	cord specifies a delayed effective date, but not an effective time, at 12:01 a	.m. on	the ea	ırlier d
	e 90th day after the record is filed.			
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	MAY 7th 20,18 / / / / //			
Date)		
	1/1/1/2/27/2015	,		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00