

L19000043174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

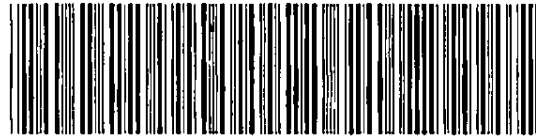
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2022 APR 11 AM 11:38  
FBI - MEMPHIS

5/16/2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Seaboard Homes LLC

\_\_\_\_\_  
Name of Limited Liability Company

RECEIVED

2022 APR 12 AM 7:46

SECRETARY OF STATE  
TALLAHASSEE, FL

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lazaro G. Castaneda

\_\_\_\_\_  
Name of Person

Seaboard Homes LLC

\_\_\_\_\_  
Firm/Company

13411 SW 20th Street

\_\_\_\_\_  
Address

Miramar FL 33027

\_\_\_\_\_  
City/State and Zip Code

Larrycastarealty@att.net

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Larry Castaneda

954

549-8539

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2022

LAZARO G CASTANEDA  
13411 SW 20TH STREET  
MIRAMAR, FL 33027

SUBJECT: SEABOARD HO2 SOLUTIONS LLC  
Ref. Number: L19000043176

We have received your document for SEABOARD HO2 SOLUTIONS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The current name of the entity is as referenced above. Please correct your document accordingly.

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.

Claretha Golden  
Regulatory Specialist II

Letter Number: 422A00011094

March 21, 2022

Registration Section  
Division of Corporations  
PO BOX 6327  
Tallahassee FL 32314

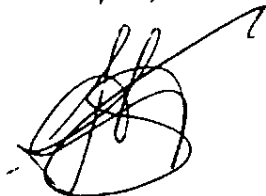
SUBJECT : SEABOARD HOMES LLC  
REF. Number: L19000043176  
LAZARO G. CASTANEDA  
13411 SW 20<sup>TH</sup> ST. MIRAMAR FL 33027

Please find the Articles of Amendment to Articles of Organization with the correct name, the previous application was sent with an error in the name.

**CORRECT NAME : SEABOARD H2O SOLUTIONS LLC**

Please make the correction.

Thank you,

A handwritten signature in black ink, appearing to be "Lazaro G. Castaneda", with a long, sweeping line extending from the top right of the signature.

Lazaro G. Castaneda

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

SEABOARD H2O SOLUTIONS LLC

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

FILED  
2022 APR 11 AM 11:38  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 02/19/2019 and assigned  
Florida document number L19000043176

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Seaboard H2O Solutions LLC

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:**

8333 NW 53rd St

**(Principal office address MUST BE A STREET ADDRESS)**

Ste # 450

Doral FL 33166

**Enter new mailing address, if applicable:**

13411 SW 20th Street

**(Mailing address MAY BE A POST OFFICE BOX)**

Miramar FL 33027

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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**

**MGR = Manager**  
**AMBR = Authorized Member**

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

[illegible]

(If 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.) Pursuant to 605.0207 (3)(b)

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.

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**