## L19000049798

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(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

TO:	Registration Se Division of Cor			
	SEA PALA			
SUBJE	ECT:		ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	indence concerning this matter	to the following:	
		MOSHE ZUCHAER		
			Name of Person	
		SEA PALACE, LLC		
			Firm/Company	<del></del>
		931 NOBLE ST		
		<del></del>	Address	
		ANNISTON, AL 36201		
		FA@PREMIUMCREDITB	City/State and Zip Code UREAU.COM	
		E-mail address: (	to be used for future annual report not	dification)
For fur	ther information c	oncerning this matter, please co	ail:	
MOSHE ZUCHAER		305 468-1560		
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclos	ed is a check for th	ne following amount:		
<b>≘</b> \$2:	5.00 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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assec, F1, 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Tenter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SEA PALACE, LLC					
( <u>Name of the Limited</u> (A	Liability Compa V Flortda Limited I	iny as it now appears on our records. Liability Company)	7 300 第三		
The Articles of Organization for this Limited Liab Florida document number L19000049798	bility Company	were filed on <u>02/22/2019</u>	28 End assigned		
This amendment is submitted to amend the follow	ving:		夢ずず		
A. If amending name, enter the new name of t	he limited liab	ility company here:			
N/A					
The new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applical	ole:	2701 EAST ATLANTIC BLVD			
(Principal office address MUST BE A STREE	T ADDRESS)	FLOOR 2			
		POPMANO BEACH, FL 33062			
Enter new mailing address, if applicable:		2701 EAST ATLANTIC BLVD			
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	FLOOR 2			
		POMPANO BEACH, FL 33062			
B. If amending the registered agent and/or registered agent and/or the new registered offi	<u>-</u> -		enter the name of the ne		
New Registered Office Address:		Enter Florida street address			
	, Florida				
		City	rida Zip Code		
New Registered Agent's Signature, if changing Re	gistered Agent:				
I hereby accept the appointment as registered	agent and agr	ee to act in this capacity. I furt	her agree to comply with th		

If Changing Registered Agent, Signature of New Registered Agent

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 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 Type of Action <u>Title</u> Name <u>Address</u> \_□ Add ☐ Remove \_ Change □ Add □ Remove \_□ Change \_\_\_\_\_ □ Remove \_□ Remove \_\_ 🗆 Change \_\_ 🗆 Add □ Remove \_\_\_\_\_ □ Change

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ffective date, if other than th	ie date of filing	:		(ор	tional)		
an effective date is listed, the date m lote: If the date inserted in this locument's effective date on the	ust be specific and block does not m	cannot be prior to seet the applical	o date of filing or i ble statutory fili	nore than 90 days afi ng requirements, tl	er filing.) Pu tis date will	rsuant to 605 I not be liste	5.020° ed as
e record specifies a delaye The 90th day after the re		ate, but not	an effective	time, at 12:01	a.m. on	the earli	er o
mated MARCH 25TH		2019	_·				

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Typed or printed name of signee

Filing Fee: \$25.00