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(Red	questor's Name)	
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COVER LETTER

Registration Section Division of Corporations

TO:

SEA OATS 2	215 LLC			
SUBJECT:	Name of Lim	ited Liability Company	_	
	mendment and fee(s) are sub			
	Randell C. Doane, Esq.			
		Name of Person	_	
	Doane & Doane, P.A.			
		Firm/Company	_	
	2979 PGA Blvd., Suite 20	1		
		Address	_	
	Palm Beach Gardens, FL	33410	;	i
	•	City/State and Zip Code	_	
	cwaters@doanelaw.com			:
	E-mail address: (to be used for future annual report notification)	_	1
For further information cor	ncerning this matter, please c	ail:		:
Claire R Waters, CP, FRP		561 656-0200 at ()	: 	· ·
Name of I	Person	at ()	ber	
Enclosed is a check for the	following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	Filing Fee, icate of Stati fied Copy final copy is enc	
Mailing Address: Registration So Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite	e 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEA OATS 215 LLC		
(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
he Articles of Organization for this Limited Liability Compa	any were filed on June 20, 2019	and assigned
lorida document numberL19000162660		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited li	ability company here:	
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS		 -
		<u> </u>
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		<u>.</u>
 If amending the registered agent and/or registered office gent and/or the new registered office address here: 	ce address on our records, enter the	name of the new regist
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	D. District	
	Enter Florida street address	
	, Florid	a
	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, 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
MGR	David W. Dupert, Jr.	729 Biscayne Drive, West Palm Beach, FL 33401	= Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			⊡Add
			i Remove
			□Change
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Filing Fee: \$25.00