LZO 000103205

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Dx	ocument Number)	
Certified Copies	Certificates	s of Status
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SEI: Investigations LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Erby Beauvois Name of Person
SEI Investigations Firm/Company
6001-21 Arcyle Forest Blud. #3572
Dackenville Fl. 3224/ Clty/State and Zip Code
Seipi (on-lact Ofmoil, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (40') 385-3078 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{ Certificate of Status} \text{ \$\times \text{ S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} }\text{ \$\times \text{ S60.00 Filing Fee, Certified Copy (additional copy is enclosed)} }\text{ \$\text{ Certified Copy (additional copy is enclosed)}} \text{ \$\text{ Certified Copy (additional copy is enclosed)}} \$\text{

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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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	stigations LCC
(Name of the Limits	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
0	
This amendment is submitted to amend the following	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE	T ADDRESS)
	70 70
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE A	BOX)
	*. 0
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) e Articles of Organization for this Limited Liability Company were filed on 4/14/2020 and assigned rida document number 2/2000/0/205 s amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C." ter new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS) ter new mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered address here: Name of New Registered Agent: New Registered Office Address: New Registered Office Address: GOOL-21 Program Florida street address ROOL-21 Program Florida street address ROOL-21 ROOL-	
Name of New Registered Agent:	
New Registered Office Address:	6001-21 Argy & Forces Blud #350
	Jacksonville, Florida 32214 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 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
mG?	Esty Bearns, S		□Add
		6001-21 Dr94/2 Forest 31.	□Remove
		- JECK 1000 11 (42. 310-71	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			□Add
			Remove
			Change

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If an effec Note: If	e date, if other than the date of filing:
1 ' C1	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 d.
Dated _	Signature of a member or authorized representative of a member Typed or printed name of signee
	Signature of a member or authorized representative of a member
	Signature of a memoer of authorized representative of a member