LZ0000135644

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TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

SUBJECT:	SEAL HOI	LDINGS, LLC	•	
		Name of Lim	nited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
		ondence concerning this matter		
		Laura Cueto Estrella		
			Name of Person	
		SEAL Holdings, LLC		
			Firm/Company	
		4684 Foxview Place		
			Address	
		Lake Worth, FL 33467		
		 	City/State and Zip Code	
		Laura.Estrella@icloud.com		
		E-mail address: (to be used for future annual report not	fication)
For further in	nformation c	oncerning this matter, please co	all:	
Laura Cueto Estrella		305 3083806		
Name of Person			ne Telephone Number	
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling 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)
	ling Addres		Street Address:	
Registration Section Division of Corporations		Registration Se		
	Box 632	-	Division of Cor The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEAL HOLDINGS, LLC

2003 AUG 17 AH 10: 39

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/19/2020 ___ and assigned Florida document number L20000135644 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 _, Florida _

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.

City

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 2120 AUG 17 AH 10: 39	Type of Action
MGR	Sven Samson	4684 Foxview Place	= Add
		Lake Worth, FL 33467	□ Remove
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ffective date, if other the an effective date is listed, the c	an the date of filing late must be specific and	g:d cannot be prior to o	date of filing or more ((optiona han 90 days after filir	d) ng.) Pursuant to 605.0	0207
lote: If the date inserted in ocument's effective date or	this block does not i	meet the applicabl	e statutory filing re	quirements, this da	te will not be liste	d as
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				ha amalian afa (b.). "	The 90th day after	the
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record specifies a delayed of is filed.	effective date, but not	t an effective time	, at 12:01 a.m. on ti	ne earner of: (b)		
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