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## **COVER LETTER**

Division of Co		•	· ·
The Seale	s Group LLC	v)	,etc
3000E1.	Name of Lit	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
		Name of Person	
	Mailing A	\ddress	
		UND CHASE DRIVE	
	GIBSON	TON, FL 33534	
		Address	
		City/State and Zip Code	
	E-mail address:	to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Jordan R. Seales		813 833-8260	
Name (	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for t	ha fallawing maanus		
	-	_	
■ \$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 Addres		Street Address:	
Registration S		Registration Sec	
Division of C	orporations	Division of Corr	oorations

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

The Seales Group LLC (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 05/26/2020 and assigned Florida document number <u>L0000141584</u> 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

## 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 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	Jordan R. Seales	9944 Hound Chase Drive Gibsonton, Florida 33534	<b>=</b> Add
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Signature of a member or authorized representative of a member			N R	Jene	<del></del>	

Filing Foo: \$25.00

Typed or printed name of signee