LRC000151964

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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Omend/ Name Chang

COVER LETTER

Division of Corporations	
SUBJECT: S&B GVIII Fresh Sea Food MC	orket L.C.
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Tatyanah Hinson Name of Person Seafard	Market W.C.
Firm/Company	
8134 PIFFMAN AVA	
Pensacula, Fu 32534 City/State and Zip Code	
Sb Slatud @ Out 10016. C	DOM port notification)
For further information concerning this matter, please call:	20 HGV
Tatyana Himon ar (89) 4	105.0038
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check for the following amount:	9 (T)
\$25.00 Filing Fee \$\times \text{Solution}\$ \$30.00 Filing Fee & Certificate of Status \$\text{Certified Copy}\$ tadditional copy is enclosed.	☐ \$60.00 Filing Fee, Certificate of Status &

TO:

Registration Section

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

SDB GILLIFISH Seafi	any as it now appears on our records.) Liability Company)	· · · · · · · · · · · · · · · · · · ·
(A Florida Limited	Liability Company)	P 120
The Articles of Organization for this Limited Liability Company	were filed on 06/03/2020	and assigned.
Florida document number LZ 00 001 51 964.	• •	
_		• • • • • • • • • • • • • • • • • • • •
This amendment is submitted to amend the following:		> f _* - 1
A. If amending name, enter the new name of the limited liab	ility company here:	3
ttingon's Spafood LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	225 N Pace B	lvd
(Principal office address MUST BE A STREET ADDRESS)	Pensacula, fl	32905
	00-01 0-00 0	المدرا
Enter new mailing address, if applicable:	225 N Pace B	IVa
(Mailing address MAY BE A POST OFFICE BOX)	rensaciate 5	2505
P. If amonding the registered agent and/or registered affice	ndd on ourdo onto the	of the manyinterned
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the Ha	me of the new registered
· · · · · · · · · · · · · · · · · · ·		
Name of New Registered Agent:		
New Registered Office Address:		
rem registered office (radicas).	Enter Florida street address	
	. Florida	
·	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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
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			□Change
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			□Remove
			🗆 Change
			🗆 Add
			□ Remove
			□Chapee

Page 2 of 3

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary:)
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C ff a c t	ive date, if other than the date of filing:
lf an efi <u>Note:</u>	ive date, if other than the date of filing: [cetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as them; seffective date on the Department of State's records.
ne re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	November 6 2026
	Sufficient of a frember or authorized representative of a member
	THINN HINCON

Page 3 of 3

Filing Fee: \$25.00