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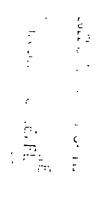
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PICK-UP	☐ WAIT	MAIL
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A. BUTLER FEB - 1 2022

COVER LETTER

TO:

TO:	Registration Se Division of Cor			
erm m	SEA G REI			
SUBJE	CT:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		endence concerning this matter	-	
		ELIZABETH MARTINEZ		
			Name of Person	
		SEA G REEF LLC		
			Firm/Company	, , , , _
		1040 NW 79 AVENUE		
		······	Address	
		PLANTATION FL 33322		
		SALES@SEAGREEF.COM	City/State and Zip Code	
		-	to be used for future annual report notif	ication)
For furth	ner information c	oncerning this matter, please ca	all:	
ELIZAE	BETH MARTINI	ΞZ	754 400-1772 at ()	
-	Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed	d is a check for th	ne following amount:		
■ \$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 Address Registration S Division of C P.O. Box 632 Tallahassec, I	Section forporations 7	Street Address: Registration Sec Division of Corp The Centre of Te 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEA G REEF LLC			en .
(Name of the Limi	ted Liability Compan (A Florida Limited Li	y as it now appear ability Company)	s on our records:)
The Articles of Organization for this Limited L	iability Company v	were filed on $\frac{4/1}{2}$	5/2021 and assigned
Florida document number 121000177796			
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liabi	lity company he	<u>re</u> :
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the de	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREI	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1040 NW 79 AV	
B. If amending the registered agent and/or agent and/or the new registered office addre	<u> </u>	ddress on our re	ecords, enter the name of the new register.
Name of New Registered Agent:			
New Registered Office Address:	1040 NW 79 AV	VENUE	
	-	Enter Florida street address	
	PLANTATION		, Florida ³³³²²
		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
MGR	ELIZABETH MARTINEZ	1040 NW 79 AVENUE	Add
		PLANTATION, FL 33322	□Remove
			□Change
			□Add
			□Remove
		 	□Change
			□Add
		□Remove	
			□Change
		- 	□Add
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effective date i e: If the date	s listed, the date m inserted in this	ne date of filing oust be specific and block does not m Department of S	cannot be prior to neet the applicab	date of filing or mo le statutory filing	(optio re than 90 days after f requirements, this	nal) iling.) Pursuant to 605.020 date will not be listed a
cord specifies s filed.	a delayed effect	ive date, but not	an effective tim	e, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
JANUAR'	Y 14	7/)	2022			
·		// / /	1	1		

Typed or printed name of signee