121000419608

(Red	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	//State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Nan	ne)	
(Document Number)			
Certified Copies Certificates of Status		of Status	
Special Instructions to F	Filing Officer:		

Office Use Only

A. RIVERS NOV 1 8 2021



900375887399

11/02/21--01018--012 **80.00

2021 HOV -2 AM 9: 05 SEC -077/24Y OF STATE

COVER LETTER

TO:

Registration Section
Division of Corporations

SEASIDE BUSINESS SOLUTIONS LLC SUBJECT: __ 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: IRAIDA R MARTINEZ Name of Person SEASIDE BUSINESS SOLUTIONS LLC Firm/Company 2236 BROAD WATER DR Address JACKSONVILLE, FLORIDA 32225 City/State and Zip Code BOOKKEEPING@SEASIDE-SOLUTIONS.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: IRAIDA R MARTINEZ Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$55.00 Filing Fee & ■ \$60.00 Filing Fee, □ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEASIDE BUSINESS SOLUTIONS LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number L21000419608		ssigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	ity Company," the designation "LLC" or the abbreviation "I	L.C."
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 ac agent and/or the new registered office address here:	ddress on our records, enter the name of the ne	w registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address Florida City Zip Code ee to act in this capacity. I further agree to com	
New Registered Agent's Signature, if changing Registered Agent:	1	e B same Amerika
I hereby accept the appointment as registered agent and agree	ee to act in this capacity. I further agree to com	ply with the

provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar varie and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documents

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
AMBR YISANDRA ROSS	YISANDRA ROSS	6080 BRIARFOREST RD N	
		JACKSONVILLE, FL 32277	≣Remove
			Change
			□Add
			Remove
			□Change
		□Add	
		□Remove	
			Change
			□Add
			Remove
			□ Change
		Remove	
		Change	
		□Adđ	
			□Remove
			Change

_	
_	
_	
-	
_	
-	
_	
_	
_	
_	
_	
_	
	<u> </u>
-	
_	
Effecti	ve date, if other than the date of filing: (optional)
(If an effe	ve date, if other than the date of filing: (optional) ctive 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 ent's effective date on the Department of State's records.
docum	in serieure date on the Department of State's records.
ne record ord is file	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
olu is iii	
(OCTOBER 28TH 2021
Dated _	,
	Signature of a member or authorized representative of a member
	Signature of a normal of addition of the sentence
	IRAIDA R MARTINEZ

Filing Fee: \$25.00