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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

್ಳ∠Email Address:	
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **SEAWALLS OF AMERICA LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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HeipT. LEMIEUX JAN 26 2024

## Fax: 8134365206

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEAWALLS OF AMERICA LLC		
(Name of the Limited Lia (A Flo	ability Company as it now appears on ou orida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liabilit Florida document number L22000456915	ty Company were filed on 10/24/22	and assigned
This amendment is submitted to amend the following	<u>;</u> :	
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	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	ODRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	***************************************	
B. If amending the registered agent and/or registered agent and/or the new registered office address her		. enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et address
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Register	ered Agent:	
I hereby accept the appointment as registered age provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	d complete performance of my du d agent as provided for in Chapte tered office address. I hereby conf	ties, and I am familiar with and r 605, F.S. Or. if this decument is
	If Changing Registered Agent, Sign	nature of New Registered agent

1/25/2024 10:58 19 PST .

To 18506176383

Page: 4/5

From: Registered Agents Inc.

Fax: 8134365206

## 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	REZVANIAN, CYRUS	10565 ARCOLE COURT	
		WELLINGTON, FL 33449	⊠Remove
			[]Change
AMBR	CYRZ INVESTMENT LP	7 COPELAND ST.	<b>Ø</b> Add
		EAST YORK, ONTARIO, M4G 3E7, CANADA	□Remove
			□Change
	<del></del>		□Add
			□Remove
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			□ Add
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			□Remove
			Characa and a state of the stat

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1/23/2024 10/36:19 PS I	To 18506176383	Page: 5/5	From, Registered Agents Inc.	Fax: 813436520

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ffective date, if other than the an effective date is listed, the date mulote: If the date inserted in this bocument's effective date on the E	st be specific and lock does not t	d cannot be prior meet the applic	to date of filing of able statutory fi	'more than 90 day	(optional) s after filing.) Purs ts, this date will i	uant to 605,0207 not be listed as
record specifies a delayed effective is filed.	e date, but not	t an effective ti	me, at 12:01 a.n	1, on the earlier	of: (b) The 90t	h day after the
rated January 25th		2024				
	Rock	- 1 1 W/ 14-	1/1/2.37	ve of a member		
	Standard of a	manufacture at the	rized representati	ve of a member		<del></del>
	Signature of a	memoer or addit	mined representat	TO COLD HIGHNIGH		