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PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
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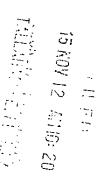
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And

NOV 13 2015

R. White



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: SEAAMERICA	CORP.			
DOCUMENT NUMB	ER:P00000086245				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	oondence concerning this mat	ter to the following:			
	Gail M. Carey				
-	Name of Contact Person				
_	SEAAMERICA CORP				
·		Firm/ Company			
146 NW Broadview Street					
· -	Address				
	Port St. Lucie, Florida 34	983			
-	City/ State and Zip Code				
sea	america@aol.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Gail M. Carey		at (772) 871-5781		
Name of Contact Person		Area Coo	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Section n of Corporations Building		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301 TD: FAX: 850-245-6897

FROM: FAI 778-871-5781



Attu · RebekAh White From · Coal M Carey REC

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 5, 2015

GAIL M CAREY 146 NW BROADVIEW ST PORT ST LUCIE, FL 34983

SUBJECT: SEAAMERICA CORP. Ref. Number: P00000086245

We have received your document for SEAAMERICA CORP, and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 4 is missing and must be completed. Please find enclosed and complete the missing page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 115A00023506

Articles of Amendment	•
to Articles of Incorporation	
of	
CEAAMEDICA CODE	15 MOV 12 ATHO: 20
SEAAMERICA CORP. (Name of Corporation as currently filed with the Flo	wide Dinty of State). It is a little
trame of Corporation as currently incurrent the Fig.	TALLATIASTE FILES
F0000008245	<u> </u>
(Document Number of Corporation (if known	own)
ursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corp. Articles of Incorporation:	poration adopts the following amendment
If amending name, enter the new name of the corporation:	:
	The new
me must be distinguishable and contain the word "corporation," "company," or Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A profession	r "incorporated" or the abbreviation and corporation name must contain the
ord "chartered," "professional association," or the abbreviation "P.A."	w.pr.aum name mas comun me
	:
Enter new principal office address, if applicable: trincipal office address MUST BE A STREET ADDRESS)	
nacipa office address <u>arour de Astreet Address</u>)	•
	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	

If amending the registered agent and/or registered office address in Florida, ent	er the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent Carey, Gail M.	
146 NW Broadview street	
(Florida street address)	
, ,	
New Registered Office Address: Port St. Lucie	, Florida 34983 US
(City)	(Zip Code)
	,
	abligations of the position
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the	obligations of the position.
	obligations of the position.
	obligations of the position.

Example:

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Saily	s Smith	·
Type of Action (Check One)	Title	Name	Address
1)Change	VTD	Beach, Edwin R.	P. O. Box 880518
Add			Port St. Lucie, Florida 34988
✓ Remove			
2) Change	PVTD	Carey, Gail M.	P. O Box 880518
Add			Port St. Lucie, Florida 34988
Remove			·
3) Change	SD	Hoff, Marie E.	P. O. Box 880518
Add			Port St. Lucie, Florida 34988
Remove			
4) Change	··		······································
Add			:
Remove			:
5)Change	 .		
Add			:
Remove			
6)Change		fn	
Add			·
Remove			:

Nov 12 15 03:03p

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	i :
Effective date if applicable:	<u> </u>
(no more than 90	days after amendment file date)
Note: If the date inserted in this block does not meet the applic document's effective date on the Department of State's records.	able statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	·
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders thro must be separately provided for each voting group entitled to to	
"The number of votes east for the amendment(s) was/were	e sufficient for approval
by	
(voling group)	!
☐ The amendment(s) was/were adopted by the board of directors action was not required.	without shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators with action was not required.	out shareholder action and shareholder:
Dated Tournbur 12	2015
Signature Jacom	Jarys
	er – if directors or afficers have not been hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	names of a received, a detect, or other court
Gal M	1. Carey
(Typed or printed r	ame of person signing)
Presiden	- t
(Title o	Freeson signing)