## POTOBSILI91

(F	Requestor's Name)
-	
(/	Address)
(/	Address)
(1	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
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11/18/16--01009--004 \*\*13.75

11/02/16--01011--013 \*\*30.00

And 1:07 21 2010

R. White

1:01 KV 81 AGN 91



November 3, 2016

AMANDA L SHORT 585 SKY HARBOR DR #321 CLEARWATER, FL 33759

SUBJECT: SEA ROYAL REALTY INC

Ref. Number: P07000051491

We have received your document for SEA ROYAL REALTY INC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$5.00 is due.

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: 616A00023695

REGEIVED

16 NOVIT PH 1:07

DEFINENCE OF SATE
INVESTIGATIONS
TALL ANA SSTELL GREAT

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Sea R	oyalR	ealk	4
DOCUMENT NUMBER: PO70006			/
The enclosed Articles of Amendment and fee are subr	nitted for filing.		
Please return all correspondence concerning this matter	er to the following	ng:	
MARCI S	SHORT		
	Name of Cont		
Sea_	Koyal - Firm/Con	zeal	4
585 SI			#321
	Addre	ess	
CLEAG	WATER,	FL	3375 5
	City/ State and	d Zip Code	<b>?</b>
Marcie-Seavous E-mail address: (to be used	al real d	4 C	emotification)
For further information concerning this matter, please	call:		
MARCISHORT	at (	727	421-1048
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made pa	yable to the Flo	rida Depa	rtment of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status PAID \$3000 \\ \( \text{PAID} \)	□\$43.75 Filing Certified Cop (Additional control of the control o	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address			Address
Amendment Section Division of Cornerations			ment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment**

, to

Articles of Incorporation

16 NOV 18 AM 10: 15

Seg RAUALI	Realty Inc.		
(Name of Corporation as currently filed with the Florida Dept. of State)			
P0700005	1491		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
	The new		
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Noellange		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NO CHAnge		
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:			
Name of New Registered Agent Amanda	Short		
585 SKY A	ARBOR DR. \$321, Closewater, FL3395		
New Registered Office Address: CUAFUL	OATUR		

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones .	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	TP MANA BRO	GING WILLIAM L. SHORT	585 SKYHARBORDR #321
Add Remove	BRO	LEA	CLEARWATER, FL 3375
2) Change	AM SHARA	MARCI L.SHURT PHOLDER	585 SKY HARBORBR. #321
Remove 3) Change	P, [	Amound L. SHORT	CLEARWATER, FL 33759 585 SKG HARBOR
Add	NANAG	ing Broker	Cleanwarder, Fl 3375
4) Change			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additio</i>	nal sheets, if necessary	rticles, enter change( v). (Be specific)				
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provisions fo	rent provides for an exit implementing the auplicable, indicate N/A)	mendment if not cont	ion, or cancellati	on of issued sha ndment itself:	ares,	
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The date of each amendment(s) adop	ntion: 11/1 <b>5</b> /16	, if other than the
late this document was signed.		, it offices that the
Effective date if applicable:	11/15/16	
<u></u>	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this block document's effective date on the Department.	ck does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the	ne amendment(s)
	ved by the shareholders through voting groups. The fo ch voting group entitled to vote separately on the ame	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action	and shareholder
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and	shareholder
	1-15-16	
selected, 1	etor, president or other officer – if directors or officers by an incorporator – if in the hands of a receiver, trusto fiduciary by that fiduciary)	
_	AMANDA L. SHORT (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRESIDENT DIRECTOR (Title of person signing)	
	(Title of person signing)	