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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Cor	perations	ø		
	0 1 0 0 0 0 0	3		
NAME OF CORPO	ORATION: Seabrook Capital N	ranagement inc		_
DOCUMENT NUM	IBER: P11000055082			 -
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Scott Goedert	* ***		
		Name of Contact Persor	1	
	Seabrook Capital Managemen	nt		
		Firm/ Company		
	PO Box 1642			
		Address		
•	St Augustine FL 32085			
	•	City/ State and Zip Cod	2	
	G101@comcast.net			
	E-mail address: (to be us	sed for future annual report	notification)	_
For further informati	on concerning this matter, plea	se cull:		
Scott Goedert		at (315-1884	<u> </u>
Name	of Contact Person	Area Co	de & Daytime Telephone N	
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	RETAR
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy	ASCED ASCED

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

(Additional Copy

is enclosed)

Articles of Amendment to Articles of Incorporation

σf

Seabrook Capital Management Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P11000055082	
(Document Number of Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folits Articles of Incorporation:	lowing amendment(s) to
A. If amending name, enter the new name of the corporation:	
Seabrook Corp.	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must constructed, "professional association," or the abbreviation "P.A."	eviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	2022 OC
Name of New Registered Agent	
New Registered Office Address:	
(City)	Cap Cole
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 possible signature of New Registered Agent, if changing	ition.
Mghature of New Registered Agent, if Changing	
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

. 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 fisted 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: <u>X</u> Change	<u>PT</u>	John Doe				
X Remove	\underline{Y}	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Nan</u>	<u>nc</u>	<u>Ad</u>	<u>dres</u> s	
1) Change				_ /		
Add				/_		
Remove				/		
2) Change				/ _		
Add			/			
Remove 3) Change		_				
Add						
Remove					·····	
4) Change						
A d d						
Remove						
5) Change				_ _		
Add					_	
Remove						
6) Change			/			
Add		/	/			
Remove		- 1				

(Attach addition	nal shoets, if necessary). (Be specific)
 -	
•	
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F. If an amendme	ent provides for an exchange, reclassification, or cancellation of issued shares,
if not app	ent provides for an exchange, reclassification, or cancellation of issued shares, rimplementing the amendment if not contained in the amendment itself: plicable, indicate N/A)
1,5	
 	
	

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.	/2022	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were addaction was not required.	pted by the incorporators, or board of directors without shar	cholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the a fficient for approval.	amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amenda	wing statement nent(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(toling group)	
10/06/2022 Dated		
selecte	irector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, atted fiduciary by that fiduciary)	ve not been or other court
	Alan S Goedert	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	