P18000054991

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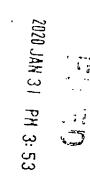


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C TALLENT





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: SEASIDE DESIG	NZ, INC.	
DOCUMENT NUM	1BER: P18000054991		
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	VINCENT C DILEONARDO	o	
	- 	Name of Contact Person	1
	SEASIDE DESIGNZ, INC.		
		Firm/ Company	
	16004 GOLDEN LAKES D	• •	
		Address	
	WIMAUMA, FLORIDA 335	98	
		City/ State and Zip Code	
	ISWAN813@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
VINCENT C DILEONARDO		727 at (280-3414
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 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 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section In of Corporations In of Tallahassee In Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

(Name of Corporation as currentle P18000054991	y filed with the Florida Dept. of State)	
P18000054991		
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the follo	owing amendment(s) t
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "or "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must co	
B. Enter new principal office address, if applicable:	16004 GOLDEN LAKES DRIVE	
(Principal office address MUST BE A STREET ADDRESS)	WIMAUMA, FLORIDA 33598	
		201
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16004 GOLDEN LAKES DRIVE	20/20 JAH 31 PM 3: 53
	WIMAUMA, FLORIDA 33598	<u> </u>
		P
D. If amending the registered agent and/or registered office add		 မှ မှ မ
new registered agent and/or the new registered office address		
Name of New Registered Agent VINCENT C DILEONAR	RDO	
16004 GOLDEN LAKES	16004 GOLDEN LAKES DRIVE	
(Florida str	(Florida street address)	
New Registered Office Address:	335 . Florida	,98
	(City)	(Zip Code)

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

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)

Remove

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	TRACEY M CRONIN	13246 4TH ST EAST SUITE#2
Add			MADEIRA BEACH, FL 33708
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	.	-	
Add			
Remove			
6) Change	 -		
Add			

	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

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The date of each amendment(s) adoption:	, if other than the
	ZO ZO (no more than 90 days after amendment file date)
	of meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE)
The amendment(s) was/were adopted by the i action was not required.	incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) approval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amen	dment(s) was/were sufficient for approval
by	ing group)
JANUARY 27-2020 Dated Signature	
(By a director, presi	dent or other officer – if directors or officers have not been reporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
VINCENT	C DILEONARDO
	Typed or printed name of person signing)
PRESIDEN	NT
,,,,	Title of person signing)