P2000068318

(Requestor's Name)
(Address)
(Address)
((ddless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Contined copies
Special Instructions to Filing Officer:

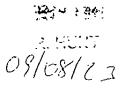
Office Use Only



100415202621

09/08/23--01022--015 **52.50

SIPS SEP - 8 PRIDE LO



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPORATION: Se	wo rook Group Inc.
	000068318
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
<u></u>	Name of Contact Person Para St. Firm/ Company Address Address City/ State and Zip Code Used for future annual report notification)
For further information concerning this matter, ple	
•	at (904) 315 - 1884, Area Code & Davring Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & S\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$43.75 Filing Fee & S\$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of		
Seubrook (-vays Inc. (Name of Corporation as currently filed with the Florida Dept. of State)		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendits Articles of Incorporation:	dment(s) to
A. If amending name, enter the new name of the corporation: WALLAND MALANZ AS Sealow I Two.—The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp" Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the wichartered, "professional association," or the abbreviation "P.A."		
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)	2023 SEP -8 PM	CHASTER OF COMP.
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:	PM 12: 40	
Name of New Registered Agent		
(Florida street address)		
New Registered Office Address:, Florida		
icit) izth 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)

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

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	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			~ :
2) Change			2023 SEP
Add			
Remove Change		<u> </u>	2023 SEP - 8 PH 23
Add			PH 12 4.0
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		I .	

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	
	,
	/
/	
	
	
	ŗ
	c
	, t
	4
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(y not apprecione, material issue)	
	
	
/	

UHSon Je Chingson

The date of each amendment(s) add date this document was signed.	option: 4-4-2023.	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date vartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	ted by the incorporators, or board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected.	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	7 104:21 44 8- 435 8302 1- (1947)
-	(Typed or printed name of person signing)	+ , 5
	Prosi Dent	
_	(Title of person signing)	