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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
789,707,672	
Office Use Only	



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67/18/22--01034--028 **43.75

22 0CT 31 PH 4: 20

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: COOST 2 COOST FINISHING LLC	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Micah L Woodson	
CAST 2 (DUST FINISHIM LLC	
1027 BONKS KOOd	22 0C1
Margate FL. 33063	22 OCT 31 PH 4: 20
City/ State and Zip Code	Tr F
E-mail address: (to be used for future armual report notification)	: 20
For further information concerning this matter, please call:	
Micah L Wardson an 954, 709-3960	<u> </u>
Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



Transition (E. N. E.).

2022 OCT 31 PM 12: 33

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2022

MICAH L. WOODSON 1627 BANKS ROAD MARGATE, FL 33063

SUBJECT: COAST 2 COAST FINISHING, LLC

Ref. Number: L09000043364

4/

We have received your document for COAST 2 COAST FINISHING, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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

Michael A Hall OPS Clerk

Letter Number: 322A00022674

22 0CT 31 PH 4: 20

COVER LETTER

TO:

Registration Section
Division of Corporations

CUB ICZYP.	COAST 2 CO	AST FINISHING LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
	ondence concerning this matter			
		MICAH L. WOODSON		
		Name of Person	<u> </u>	
	COAS	T 2 COAST FINISHING LLC		
	· · · · · · · · · · · · · · · · · · ·	Firm/Company		
	4	4350 NW 30th St. Suite 337		22
		Address		000
	CC	CONUT CREEK, FL 33066		22 0CT 31 PM 4: 20
		City/State and Zip Code		
		2c_finishing@yahoo.com		- 1
	E-mail address: (to be used for future annual report notif	ication)	: 20 :05
For further information c	oncerning this matter, please co	all:		· •
MICAH L. V	VOODSON	954 709-3960		
Name o	f Person		e Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Stat Certified Copy (additional copy is end	ius &
Mailing Address Registration S Division of C	Section	<u>Street Address:</u> Registration Sec Division of Cor		
P.O. Box 632	27	The Centre of T	allahassee	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee. FL 32303

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	LADY L WOODSON	4350 NW 30th St.	□Add
		Coconut Creek, FL 33066	■Remove
			□Change
		_	□Add
			□Remove
			Change Change 77 77 77 77 77 77 77
			3 CF Change
	.		
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ne Articles of Organization for this Limited Liability Company were filed ona		
	ınd assig	ned
lorida document numberL09000043364		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability company here:		
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrevia	tion "L.L.	C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS) 1627 Banks Road	22	<u> </u>
Margate, FL 33063	0CT	Ö.
	<u> </u>	25
nter new mailing address, if applicable: 4350 NW 30th St. Suite 337	<u> </u>	_605 7
Aailing address MAY BE A POST OFFICE BOX) Coconut Creek FL 33066	<u> </u>	G
	2	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 2 of 3

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<u>iote:</u> If th	date, if other than the date e date is listed, the date must be s ne date inserted in this block d s effective date on the Depart	does not meet the appli	icable statutory fil	(op more than 90 days at ing requirements, t	otional) ter filing.) Pursuant (his date will not b	o 605.02 e listed
	I specifies a delayed eff th day after the record		ot an effective	time, at 12:01	l a.m. on the ϵ	arlier
	October 20th	2022	·			
ated						
ated	1	Mind JOA	x			
ated	N Signa	Nicial JOO ature of a member or aut	horized representati	ve of a member		_

Filing Fee: \$25.00