## L12000129549

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SECRETARY OF STATE
STATE AHASSEE FLORID

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## **COVER LETTER**

	gistration Sec vision of Corp			
CUDIECT.		ertifications, LLC		
SUBJECT:	. <u> </u>	Name of Limi	ited Liability Company	
The enclose	d Articles of A	amendment and fee(s) are subr	nitted for filing.	
Please retur	n all correspor	idence concerning this matter t	to the following:	
		Laura Lucy		
			Name of Person	
		Beachside Certifications, L	LC	
			Firm/Company	
		102 Trista-	Terrace Cart	
		Destin, FL	32541 City/State and Zip Code	
		laura@beachsidecert.com		
			o be used for future annual report notif	ication)
For further i	information co	ncerning this matter, please ca	ıll:	
Laura Lucy	•		850 598-1181	
	Name of	Person	850 598-1181at () Area Code Daytimo	: Telephone Number
Enclosed is	a check for the	e 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 Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

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

STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	TO	<b>)</b>
ARTICLE	ES OF O	RGANIZATION 2/2 /
	$\mathbf{O}$	F ASS TANK
,		RGANIZATION  F  Ty as it now appears on our records.  iability Company)
Beachside Certifications, LLC		The state of the s
(Name of the Limited Liab	ility Compar	iy as it now appears on our records.) iability Company)
(A Flor	da Limited L	nability Company)
The Articles of Organization for this Limited Liability	Company	were filed on 10/11/2012 and assigned
Florida document number L12000129549		<del></del>
Torida document number	<u> </u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liahi	lity company here:
N/A	mice me	<u>, company 1.013</u> .
	imited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words 12	milica Elaom	
Enter new principal offices address, if applicable:		102 Trista Terrace Court
(Principal office address MUST BE A STREET ADDRESS)		Dostin, FL 32541
Enter new mailing address, if applicable:		102 Trista Terrace Cart
(Mailing address MAY BE A POST OFFICE BOX)		Destin, FL 32541
Mulling dudress WAT BE A FOST OFFICE BOAT		CRS11PC F - SC 11
R If amending the registered agent and/or reg	ristered of	fice address on our records, enter the name of the new
registered agent and/or the new registered office ad		
•	-	
Name of New Registered Agent: Lau	ra Lucy	
	~~~	11 - 0 +
New Registered Office Address:	OS IV	Sta Terraco Cort  Enter Florida street address
	Doc-	Florida 32541

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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Laura Lucy	162 Trista Terraco Ca	<u> </u>
		102 Trista Terraco Ca Destin, FL 32541	□ Remove
			Change
MGR	Sherry Lynn Blauner	69 Anchor Lane	Add
		Santa Rosa Beach, FL 32459	<b>≅</b> Remove
			□ Change
			Add
			□ Remove
			Change
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			Add
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			Change
			Add
			☐ Remove
			Change

. If amending any other inform	ation, enter change(s)	here: (Attach additio	nal sheets, if necess	sary.)	
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Effective date, if other than the (If an effective date is listed, the date modern listed). If the date inserted in this is document's effective date on the state of the record specifies a delayer.	ust be specific and cannot be block does not meet the ap Department of State's reco	prior to date of filing or mo pplicable statutory filing ords.	g requirements, this d	ing.) Pursuant to ate will not be	listed as th
The 90th day after the re	cord is filed.	t not an enective t	ille, at 12.01 a.t	n. On the ea	imer or.
January 18 Dated	, 2016	·			
Ind B	Signature of a member or	authorized representative	of a member	7 20	- Kattle Yenes
Sherry L. Blauner and	Lawra Lucy			MAR 2	flament
<u> </u>	Typed or	printed name of signee	· · ·	<del>- 27.2</del>	- ii
	F	Page 3 of 3		PH 2: 32 OF STATE EFLORIDA	in the second
	Filin	g Fee: \$25.00		>	