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COVER LETTER

TO: Registration Section

Division of Corporations			•	
NSB COA	STAL LLC	•		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Melody Lankford, Esq.			
		Name of Person		
	Lankford Law Firm, PA			
		Firm/Company		
	140 South Beach Street, St	iite 310		
		Address		
	Daytona Beach, FL 32114			
		City/State and Zip Code		
	mlankford@lankfordlawfirn		<u> </u>	
		to be used for future annual report notif	neation)	
For further information	concerning this matter, please c	all;		
Melody Lankford		850 264-7004 at ()		
Name	of Person	Area Code Daytime	e Telephone Number	
Enclosed is a check for	the following amount:			
■ \$25,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	<i>:</i>
Mailing Addro Registration Division of 0 P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroo Tallahassee, FL	porations & Street, Suite 810	<u></u>

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NSB Coastal LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{6/22/20}{1}$ and assigned Florida document number L20000173363 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Lankford Law Firm, PA Name of New Registered Agent: 140 South Beach Street, Suite 310 New Registered Office Address: Enter Florida street address Daytona Beach City 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 hability company has been notified in writing of this change.

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
AMBR	Steven Mitchell	611 S Dixie Freeway, Suite A	□ Add
		New Smyrna Beach, FL 32168	□ Remove
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Signature of a member or authorized representative of a member			HHUM .	<u>.</u> .	
	 , .	Signature of a member or auth	orized representative of a member		_
	Steven Mitchell, Autho	Typed or prin			

Filing Fee: \$25.00