

L04 000017587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

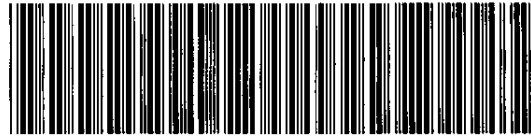
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

OCT 20 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Cool Winds Properties, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Wayne F. McCool
Name of Person

Firm/Company

P.O. Box 2547
Address

Miramar Beach, FL 32550
City/State and Zip Code

WMSFB@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wayne McCool
Name of Person

at (850) 499-3247
Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the 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:
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

Cool Winds Properties, 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 2/23/2004 and assigned
Florida document number L04000017587

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with 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)

281 Snowdrift Rd
Miramar Bch, FL
32550

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Name of New Registered Agent:

N/A

New Registered Office Address:

N/A

Enter Florida street address

_____, Florida _____
City Zip Code

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 608, 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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	Wayne Farris McCool Living Trust	P.O. Box 2547 Santa Rosa Bch FL 32459	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Charles K. Windles, Jr Revocable Trust	P.O. Box 623 Destin, FL 32540	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Mary Anne Windles Revocable Trust	P.O. Box 623 Destin, FL 32540	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Wayne McCool	119 Snowdrift Rd Destin, FL 32550	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Charles K. Windles, Jr	787 Spring Lake Rd Destin, FL 32541	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Mary Anne Windles	787 Spring Lake Destin, FL 32541	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Dated October 14, 2010

Wayne Farris McCool
Signature of a member or authorized representative of a member

Wayne Farris McCool
Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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