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COVER LETTER

Tallahassee, FL 32314

	gistration S vision of Co				
SUBJECT:	Beaches C	onstruction Company, LLC			
robate 1.		Name of Lit	nited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		Kenneh L Karr			
			Name of Person		
		Beaches Construction Cor	mpanhy, LLC		
Firm/Company					
		7603 McElvey Road			2 -
			Address		22 SEP
		Panama City Beach, Fl 32	408		N 5
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	σ <u>,</u>
		ken.karr.beaches@gmail.co	•		AH 9:
		E-mail address: (to be used for future annual re	eport notification)	9:
For further in	formation c	oncerning this matter, please c	all:		
Kennth L Ka	rr		850 596-	6091	
	Name o	f Person	at () Area Code	Daytime Telephone Number	<u> </u>
Enclosed is a	check for th	se following amount:			
□ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	sed) Certified	e of Status &
Reg Div	ling Address distration S dision of Co Box 632	ection orporations	Division	ress: ion Section of Corporations re of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Beaches Construction Company, LLC

(Name of the Limited Liability (A Florida l	y Company as it now appears on o Limited Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{8-4-2004}{1}$	1	and assigned
Florida document number 1.04000057874	_·		
This amendment is submitted to amend the following:	,		
A. If amending name, enter the new name of the limit	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designa	tion "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	ESS)		22
			38.5
			5 85 B 85
Enter new mailing address, if applicable:			♂
(Mailing address MAY BE A POST OFFICE BOX)			38
			<u> </u>
		<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our record	s, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			···-
New Registered Office Address:			
Name of New Registered Agent: New Registered Office Address: Enter Florida street address	vet address		
		, Florida	
	City	, 1101100	Zip Code
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my d ent as provided for in Chapt	uties, and I am fai er 605, F.S. Or, if	niliar with and this document is

If Changing Registered Agent, Signature of New Registered Agent

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	Karr, Susanne M		□Add
		7603 McElvey Road, Panama City Beach, Fl 32408	≡ Remove
			□Change
			□Add
		·	□Remove
			□Change
			22 Add 0.5.
			Change 5
			□Remove
			□Change
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ffective date, if other than the date of filing:	not be prior to date of filing or more than 90 days after filing.) Pursuant to 60	.c (\\\)
Note: If the date inserted in this block does not meet locument's effective date on the Department of State'	the applicable statutory filing requirements, this date will not be lis	ted as
record specifies a delayed effective date, but not an efficient.	effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
September 20 20	022	
Dated September 20 . 20		
1.7		

Typed or printed name of signee