

LD6000045121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

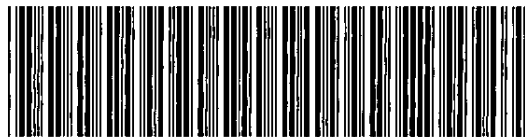
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000125050610

04/23/08--01037--011 **60.00

FILED
09 JUL -7 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
JUL 08 2009
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LACOSTE ENTERPRISES 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:

MARK CHITTY

Name of Person

Firm/Company

2460 MONTREAL ST

Address

ATLANTIC BEACH, FL 32233

City/State and Zip Code

livingupright@rocketmail.com

E-mail address: (to be used for future annual report notification)

FILED
09 JUL - 7 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MARK CHITTY

Name of Person

at (904)

401-7490

Area Code & Daytime Telephone Number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 17, 2009

MARK CHITTY
2460 MONTREAL ST
ATLANTIC BEACH, FL 32233

SUBJECT: LACOSTE ENTERPRISES LLC
Ref. Number: L06000065121

We have received your document for LACOSTE ENTERPRISES LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 709A00020539

FILED
09 JUL - 7 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

LACOSTE ENTERPRISES 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 06/28/2006 and assigned
Florida document number L06000065121.

This amendment is submitted to amend the following:

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

GOODMAN REMODELING AND IMPROVEMENTS, LLC

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)

2460 MONTREAL ST.

ATLANTIC BEACH, FL 32233

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2460 MONTREAL ST.

ATLANTIC BEACH, FL 32233

FILED
09 JUL - 7 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

2460 MONTREAL ST.

Enter Florida street address

ATLANTIC BEACH

, Florida

32233

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.

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

MGRM - MARK A. CHITTY, JR Address change to 2460 Montreal St., Atlantic

Beach, FL 32233.

Dated _____


Signature of a member or authorized representative of a member

MARK CHITTY

Typed or printed name of signee

FILED
09 JUL - 7 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA