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PICK-UP	WAIT	MAIL
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SECRETARY OF STATE

HAY 10 2016 J. HARRIS

COVER LETTER

TO:

	ation Sect n of Corp				
A. SUBJECT:	Morgan C	Coastal Realty LLC			
object.		Name of Limi	ted Liability Company		_
The enclosed Art	icles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return all	correspon	dence concerning this matter	to the following:		
•		Andrew Morgan			
			Name of Person		
		A. Morgan Coastal Realty	LLC		
			Firm/Company		
*		204 Hidden Dune CT			
			Address		
		Ponte Vedra Beach, FL 320	0.82		
			City/State and Zip Code		_
		Andrew_Morgan@bellsouth E-mail address: (t	nnet o be used for future annual re	port notification)	_
For further infor	nation cor	ncerning this matter, please ca	dl:		
Andrew Morgan	ı		904 280-	5755	
	Name of I	Person	Area Code	Daytime Telephone Num	ber
Enclosed is a che	ck for the	following amount:	•		
□ \$25.00 Filing	g Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed.	Certif sed) Certif	Filing Fee, icate of Status & ied Copy onal copy is enclosed)
	Registrat Division P.O. Box	NG ADDRESS: ion Section of Corporations : 6327 see, FL 32314	Registratio Division of Clifton Bui	f Corporations	:

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A. Morgan Coastal Realty LLC			
(Name of the Limited (A	Liability Company as it now appears on Florida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liab	pility Company were filed on 17 May	2011	and assigned
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of t	he limited liability company here:		
A. Morgan Coastal LLC			
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the design	ation "LLC" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET		DE E	ਰੰ
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	· ·	27 (4.1 27 (4.1 27 (4.1	1
Enter new mailing address, if applicable:		: : : : : : : : : : : : : : : : : : :	70 17
		<u> </u>	<u>.</u>
(Mailing address MAY BE A POST OFFICE BO	<u></u>	CRIO	بر د
		'L>	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the	name of the r
Name of New Registered Agent:	·		
New Registered Office Address:	•		
	Enter Florida st	reet 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 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.

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:

$\mathbf{AMBR} = \mathbf{A}$	Authorized Member	• ,		
<u>Title</u>	<u>Name</u>		Address	Type of Action
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Andrew Morgan Typed or printed name of signce		
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