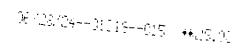
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COVER LETTER

	ision of Cor					
SUBJECT:	Nature Coast Services					
SOBJECT.		Name of Limited Liability Company				
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		George S Shultz Jr				
	Name of Person					
		Nature Coast Services				
	Firm/Company					
	2790 NW 60th Avenue					
	Address					
	Chiefland FL 32626					
		City/State and Zip Code				
		naturecoastbarns1@gmail.c	to be used for future annual report noti	fication)		
For further is	nformation c	oncerning this matter, please c	·	,		
George S Sh			352 317-7897 at ()			
	Name o	f Person	Area Code Daytim	e Telephone Number		
Enclosed is a	i check for th	ne following amount:				
■ \$25.00 F	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)		
	iling Addres		Street Address:	ction		
Registration Section Division of Corporations			Division of Cor	Registration Section Division of Corporations		
	D. Box 632		The Centre of T			
Tallahassee FL 32314			2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nature Coast Services (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 08/05/2005 Florida document number L07000040918 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 "E.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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida _ 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 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	George Samuel Shultz III	2790 NW 60th Ave	□Add
		Chiefland FI. 32626	■Remove
			□Change
AMBR	George S Shultz Jr	2790 NW 60th Ave	□Add
		Chiefland FL 32626	Remove
			□Change
AMBR	George Samuel Shultz III	2790 NW 60th Ave	= Add
		Chiefland FL 32626	□Remove
			□Change
MGR	George S Shultz Jr	2790 NW 60th Ave	■Add
		Chiefland FL 32626	
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change

	Would like to change George Samuel Shultz III to AMBR
	and Change George S Shultz Jr to MGR
iote:	ive date, if other than the date of filing: 06/24/2024 (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as them:'s effective date on the Department of State's records.
reco Listi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
ated	06/24/2024 Her S. Shull

Filing Fee: \$25.00