

L07000056969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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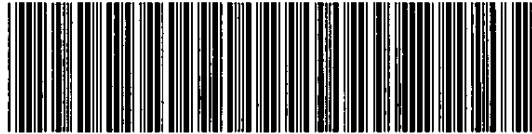
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

JUL 24 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Coastal Signature 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:

Barry G. Segal, Esquire

Name of Person

Barry G. Segal, P.A.

Firm/Company

621 17th Street

Address

Vero Beach, Florida 32960

City/State and Zip Code

bgspa@bellsouth.net

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

For further information concerning this matter, please call:

Barry G. Segal, Esquire

Name of Person

at (777)

567-5552

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

Coastal Signature Properties, LLC.

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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>
MGRM	Suzanne Robbins Schlage	4731 North Highway A1A Vero Beach, Florida 32963	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated July 6, 2009

Barbara S. Holt

Signature of a member or authorized representative of a member

Barbara S. Holt

Typed or printed name of signee