107000116979

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

	ision of Corp			
SUBJECT:	Coconut Fri	ends, LLC		
SUBJECT:		Name of Limi	ited Liability Company	
The enclosed	l Articles of 7	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Renae Page		
			Name of Person	1.2.2
		Page Law Practice, LLC		
			Firm/Company	
		5045 sw 74th Terrace		
			Address	
		Miami, Florida 33143		
			City/State and Zip Code	
		renae@plawpa.com	to be used for future annual report notif	(Total and)
For further in	nformation co	oncerning this matter, please ca		(Cation)
Renae Page			305 321-4969	
	Name of	Person	at ()	Telephone Number
Enclosed is:	a check for th	e following amount:		
\$25,00 J	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Coconut Friends, 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 $\frac{11/20/2007}{1}$ and assigned Florida document number _L07000116979 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 "EEC" or the abbreviation "EEC" 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: Page Law Practice, P.A. Name of New Registered Agent: 5045 sw 74th Terrace New Registered Office Address: Enter Elorida street address Miami 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>	<u>Address</u>	Type of Action
mgr	Florence Campion	564 av de Marseille	□ Add.
		62780, Stella, France	■ Remove
			☐ Change
mgr	Martin Campion	564 av de Marseille	
		62780. Stella, France	□ Remove
		 -	☐ Change
			☐ Remove
			□ Change
			□ Add
			☐ Remove
			□ Change
·			Add
			□ Remove
			□ Change
			Add
			Remove
			☐ Change

Marc Lesur	100 shares		
Florence Campion	0 shares		_
Martin Campien	0 share		
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	March 10, 2017	(optional)	oe n
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)