## 07000/18421

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JUN 23 2009

**EXAMINER** 



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## **COVER LETTER**

TO: Registration So Division of Co				
SUBJECT:	Coast To Coast	Publishing Group LLC	1	
		ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Blair Shank			
		Name of Person		
		Firm/Company		
		21 SE 5th Ave		
		Address		
	D	elray Beach FL 33483		
	. Die:	City/State and Zip Code		
	E-mail address: (	r@coasttocoastpub.com to be used for future annual report notific	ation)	
For further information	concerning this matter, please of	call:		
E	3lair Shank	at ( 412 ) 4	43-2879	
Name o	of Person	Area Code & Daytime	Telephone Number	
Enclosed is a check for t	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)	
MAIL	ING ADDRESS:	STREET/COURIE	R ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COAST TO COAST PUBLISHING GROUP L.L.C.

(Name of the Limited Liabilit (A Florida	y Company as it now appea Limited Liability Company)	rs on our records.)	<del>_</del>	
The Articles of Organization for this Limited Liability (Florida document numberL07000118421	Company were filed on	11/27/2007	_ and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :		
The new name must be distinguishable and end with the would be successful. L.L.C."	ords "Limited Liability Comp	any," the designation "LL	C" or the ab	breviation
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	RESS)		90	ZS
				SIGR SIGR
			12	فرور برسم سر استقر الاست
Enter new mailing address, if applicable:			~	
(Mailing address MAY BE A POST OFFICE BOX)			Ē	:
				*
			သ	•
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>enter the</u>	e name of	the nev
Name of New Registered Agent:				·-··
New Registered Office Address:				
	En	Enter Florida street address		
	, Florida			
<del></del>	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, <u>enter the title, name, and address of each Manager</u> or <u>Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

<u>Title</u> .	Name	Address	Type of Action
MGR_	Julie A Shank	613 Rockland Dr. Pittsburgh PA, 15239	Add  7 Remove
			Add Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
<del></del>			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	<del></del>
_			_ _
	:/10/00 00		<del>-</del>
Dated	Bland Signature of a member	or or authorized representative of a member	
		Blair Shank	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00