

LD8000046134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

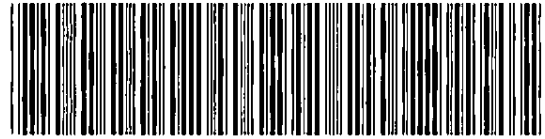
(Business Entity Name)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COASTAL PET SERVICES, 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:

TERRI M RODISH

Name of Person

COASTAL PET SERVICES, LLC

Firm/Company

1229 LOCKSLEY LANE

Address

PONTE VEDRA / FL 32081

City/State and Zip Code

TERRI@COASTALPETSERVICES.COM

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

For further information concerning this matter, please call:

TERRI M RODISH

904

631 - 7078

at ()

Name of Person

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE FL 32303
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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COASTAL PET SERVICES, LLC

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>	<u>Type of Action</u>
MGR	WILLIAM R RODISH	1229 LOCKSLEY LANE	<input type="checkbox"/> Add
		PONTE VEDRA, FL	<input checked="" type="checkbox"/> Remove
		32081	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JANUARY 24TH 2025

Jenni M. Polish

TERRI M RODISH

Typed or printed name of signee

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ST. MARY'S STATE
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Filing Fee: \$25.00