# L08000 114337

•				
(Re	questor's Name)			
(Ad	ldress)			
DA)	ldress)			
(rid	iaroso,			
(Cit	ty/State/Zip/Phone	<del>?</del> #)		
PICK-UP	☐ WAIT	MAIL		
· (Bu	siness Entity Nan	ne)		
,	·	•		
(Da	ocument Number)			
(DC	cument (varnber)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
'	•			

Office Use Only



000158586320

07/29/09--01019--025 \*\*25.00

09 JUL 29 PM 1:54

DIVISION OF CORPORATIONS

T. HAMPTON
JUL 3 0 2009

EXAMINER

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Emerald Coast Maintenance 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:
Rebecca Cantrell Name of Person
Firm/Company
_ 31 Beacon Point Dr.
Santa Rosa Beach. FL 32459
Santa Rosa Beach. FL 32459  City/State and Zip Code  Feberca buckner 09 @ gmail.com  E-mail address: (to be used for future annual report wotification)
For further information concerning this matter, please call:
Ruberca Courtell  Name of Person  at (850) 255 - 0004  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Solution} \$\ \text{Solution}\$ \$\ \text{Certificate of Status}\$\$ \$\ \text{Certified Copy} \ (additional copy is enclosed) \$\ Certifie

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

AKIR	OF OF	GANIZATI	ON	ON OF CO
(Name of the Limited I	iability Company Florida Limited Lin		s on our records.)	PH 1:5
The Articles of Organization for this Limited Lia Florida document number <u>L08000114337</u>		vere filed on	12-15-08	and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of (	he limited liabil	ity company here	¥	
The new name must be distinguishable and end with "L.L.C."	the words "Limite	d Liability Compar	ıy," the designation '	"LLC" or the abbreviation
Enter new principal offices address, if applical	ole:	31 1300	<u>icon Paint</u>	Dr.
(Principal office address MUST BE A STREET	ADDRESS)	_Santa'	Rosa Beac	<u>h FL 3245</u>
. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>			
B. If amending the registered agent and/or registered agent and/or the new registered offi			ur records, <u>enter</u>	the name of the nev
Name of New Registered Agent:				
New Registered Office Address:	31 R	reacon f	'aut	<del> </del>
	Saul	) Rich	er Florida street ad	idress
		usu lauun	. Florida	7a454

## 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.

City

Zip Code

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 = Ma	anaging Member		
Title '	Name	Address	Type of Action
MGRM	Doug Buckner	31 Beacon Point Dr. Souta Rosa Brach Fl 321	Add D Kemove
			Add Remove
			Add Remove
			Add Remove
· 			Add Remove
<del></del>			Add Remove
D. If amendi	ng any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
			SECRETARY DIVISION OF CO  09 JUL 29
Dated	July 22, 200	<u>99</u> .	PH 1:54
-	Rebe	or authorized representative of a member  CCA Can trell or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00