## 189000004623

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C. LEWIS

JUL 2 9 2009

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations  SUBJECT: DaCoSta Board Company 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:						
Danrel Da Costa						
Name of Person  Da Costa Board Company UC  Firm/Company						
113 Summer Breeze Ln.						
Santa Rosa Beach Fl 37459  City/State and Zip Code  dan costa 18 a mac. Com  E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Name of Person at (\$50) 582-7664  Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$25.00 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

FILED

DaCosta 1	Board	Co. 4C		UL 27 AM 10: 33
(Name of the Limited )	L <mark>iability Compa</mark> Florida Limited	ny as it now appears Liability Company)	on our records FCF	RETARY OF STATE KHASSEE, FLORIDA
The Articles of Organization for this Limited Lia Florida document number		,	/14/2009	and assigned
This amendment is submitted to amend the following	wing:			
A. If amending name, enter the new name of	the limited lial	bility company here	<b>:</b>	
The new name must be distinguishable and end with "L.L.C."	the words "Lim	ited Liability Compan	y," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applica	ble:	_113 Sun	mer Breeze	/_n.
(Principal office address MUST BE A STREET	ADDRESS)	Santa A	Rosa Beach 32	159
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	<u>:0X)</u>	113 Su Sauta 1	mmer Bree Rosa Beach 37	ze Ln. FL 2459
B. If amending the registered agent and/or registered agent and/or the new registered off			ır records, <u>enter tl</u>	e name of the new
Name of New Registered Agent:				
New Registered Office Address:	113	ĴUMMER Frie	Breze L	<u> </u>
·	Santa 1	Rosa Beach	Breze L er Florida street addr , Florida	EL 32459 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 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:

	· Manager I = Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Megi	r. Pantel DaCos	ta 1/3 Sammer Bre	Cal La. Add ach FL Remove
	<del></del>		Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
<del></del>			Add Remove
D. If ar	mending any other information, en	ter change(s) here: (Attach additional sheets,	The M
			FILE FARENSS FEARENSS
	7.1 /	1 > C	2 33 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Dated _	July 6	. 2009. Do	
	Signature de Daniel	(a member or authorized representative of a member of a member of state of a member of signee at the state of a member of a membe	er` ( 'C

Page 2 of 2

Filing Fee: \$25.00