109000095187

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
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TO NOV 30 AM 9: 57

D. BRUCE
DEC 1 2010
EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 23, 2010

JOSEPHINE D. OLIVEROS 1589 MAIN STREET ATLANTIC BEACH, FL 32233

SUBJECT: EAST COAST GREENERY, LLC

Ref. Number: L09000095187

We have received your document for EAST COAST GREENERY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 310A00027438

AM 9: 57 ' ar STATE E. FLORIDA

COVER LETTER

10.	Division of Corpo						_
SUBJE	ECT:	EAST COAS	T GREENERY LLC.				
SUBJI			ited Liability Company				
The end	closed Articles of Ar	mendment and fee(s) are sul	bmitted for filing.				
Please	return all correspond	dence concerning this matter	r to the following:				
			Josephine D. Oliveros		_		
			Name of Person			ි ඤ	20 A. 2004
		Eas	st Coast Greenery, LLC.			10 KOV 30	annaman .
			Firm/Company		885 1344 1344		T
1589 Main Stre		1589 Main Street		7.0 7.0	йн 9:		
			Address		1000	: 57	
		Atl	antic Beach, FL. 32233		>		
			City/State and Zip Code				
		F-mail address: 7	odyecg@comcast.net to be used for future annual report notific	ation)			
For fur	ther information con	cerning this matter, please of		ation,			
	Jody Name of P	y Oliveros	at (49-3572			
	Name of P	erson	Area Code & Daytime	reiepnone Number			
Enclose	ed 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)	Certified	te of Statu		sed)
MAILING ADDRESS: Registration Section		on Section	STREET/COURIE Registration Section				
Division of Corporations		of Corporations	Division of Corporat	ions			

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

ARTICLES OF AMENDMENT , TQ ARTICLES OF ORGANIZATION OF

East Co	ast Greenery, LLC)		
(Name of the Limited Liability (A Florida	Company as it now appe Limited Liability Company	ars on our records.)		
The Articles of Organization for this Limited Liability C	Company were filed on	October 1, 2009 and a	ssigned	
Florida document number L09000095187	<u>_</u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company h	e <u>re</u> :		
The new name must be distinguishable and end with the wor"L.L.C."	ds "Limited Liability Com	pany," the designation "LLC" or the	abbreviation	
Enter new principal offices address, if applicable:	<u> </u>		···-	
(Principal office address MUST BE A STREET ADDI	(ESS)	2 5	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		***** 30	Alfridaying Shora, ride	
Enter new mailing address, if applicable:		FLORID		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>		
				
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, enter the name	of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	Cin	, Florida Zip Cod	do	
	City	Zip Coo	ie	

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGMR	Josephine D. Oliveros	1589 Main Street Atlantic Beach, FL 32233	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	- 80 mm
		SEE CONOA	-R [7]
Dated	November 18 , 201		
_	//	or authorized representative of a member	
-		phine D. Oliveros or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00