

**L091000104637**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

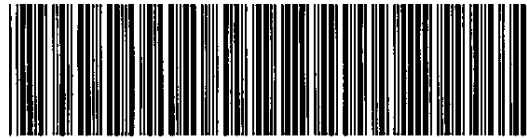
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**100263477151**

09/22/14--01045--003 \*\*30.00

**FILED**

SEP 22 2014

B. BOSTICK

SEP 23 2014

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Coastmark Construction 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:

Yane F. Zana

Name of Person

Coastmark Construction Company, LLC

Firm/Company

1040 Foster Lily Ln

Address

Vero Beach, FL 32903

City/State and Zip Code

Yzana@coastmark.com

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

For further information concerning this matter, please call:

Yane F. Zana

Name of Person

at (772) 532-3418

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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SEP 22 10 11 AM '03

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Coastmark Construction Company, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/29/2009 and assigned Florida document number LO9000104637.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_  
Enter Florida street address  
\_\_\_\_\_, Florida  
City Zip Code

FILED  
14 SEP 26 P.M.  
TALLAHASSEE  
FLORIDA

**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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>                   |
|--------------|------------------------|----------------------|-----------------------------------------|
| AMBR         | Antonia Corro Barbieri | 1040 Easter Lily Ln  | <input checked="" type="checkbox"/> Add |
|              |                        | Vero Beach, FL 32963 | <input type="checkbox"/> Remove         |
|              |                        |                      |                                         |
| AMBR         | Carlo Barbieri         | 1040 Easter Lily Ln  | <input checked="" type="checkbox"/> Add |
|              |                        | Vero Beach, FL 32963 | <input type="checkbox"/> Remove         |
|              |                        |                      |                                         |
|              |                        |                      | <input type="checkbox"/> Add            |
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|              |                        |                      |                                         |

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SEP 22 1994  
FBI - MIAMI

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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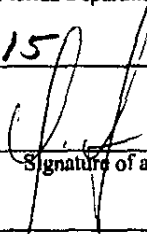
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated September 15, 2014

 YAMP F-ZANA Monique Mabe  
Signature of a member or authorized representative of a member

\_\_\_\_\_  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
SEP 22 2014  
CLERK OF COURT  
STATE OF FLORIDA