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(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

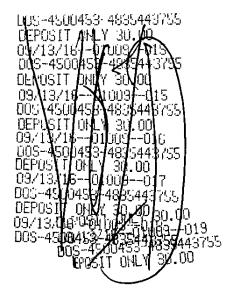
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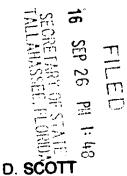
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2016

STEVE GAGAS 259 COMMERCIAL BLVD STE 2 LAUDERDALE BY THE SEA, FL 33308

SUBJECT: GOLD COAST SCUBA, LLC

Ref. Number: L09000110277

We have received your document for GOLD COAST SCUBA, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 216A00019797

COVER LETTER

Division of Cor	porations		
SUBJECT: <u>Co</u>	A Coast Scub Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Steve (Name of Person	<u> </u>
	<u>Gold Coo</u>	St Scuba LLC Firm/Company	
	259 Com	Mercial Blud Ste Address	<u> </u>
	Laudendale F	By The Sea 333 City/State and Zip Code	800
		to be used for future annual report notifi	
	E-mail address: (t	to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	all:	ALSO EN TI
Steve Ga	995 Person	at (954) 616-5 Area Code Daytime	1909 Telephone Number Telephone Number Telephone Number
Enclosed is a check for th	e 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:

TO:

Registration Section

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

Gold Coast s	Scuba LLC
(Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Li	iability Company were filed of Nov 12, 2009 and assigned
Florida document number LO90001102	<u>רך</u> .
This amendment is submitted to amend the follo	owing:
A. If amending name, <u>enter the new name of</u>	the limited liability company here:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE	<u></u>
B. If amending the registered agent and/ registered agent and/or the new registered of	or registered office address on our records, enter the name of the new
	CY CHE SET
Name of New Registered Agent:	Steve Gagas
New Registered Office Address:	Enter Florida street address
	Lowderdale By the Sea Florida 33308 = E

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 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>	Address	Type of Action
MGR	William Francer	520 SE 5th Ave. \$1302	Add Add
		Fr lauderdale, F) 3330)	□ Remove
			Change
MGR	David Hoffert	3321 NW 47 + terr, * 227	
		Lauderdale lakes, Fl 33319	Remove
			🗆 Change
			□ Add
			Remove
			Change
			Add
			Remove
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Effectiv	re date, if other than the date of filing: (optional) (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0	
Note: I:	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.4 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records.	0207 d as :
ne reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	r of:
	September 7, 2016.	
Dated _	-eficace, , Det.	
Dated _	A Dela	
Dated _	Signature of a member or authorized representative of a member Steve Gagas	

Page 3 of 3

Filing Fee: \$25.00