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T. HAMPTON

SEP = 8 2019

EXAMINER

COVER LETTER

TO:

Registration Section

Division of C	orporations		3 •	
SUBJECT:	SUNCOA	ST BERRY, LLC		
SUBJECT:		ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
		Cynthia Merrell Name of Person		
	,	Suncoast Berry, LLC		
	Firm/Company			
	22			
		Dunedin, FL 34698		
		City/State and Zip Code		
	ga E-mail address: (atorb802@yahoo.com to be used for future annual report notific	ation)	
For further information	concerning this matter, please of	all:		
	ynthia Merrell	at (727) 7	733-3132	
Name	on reison	Area Code & Daytime	rerephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	LING ADDRESS: stration Section	STREET/COURIE Registration Section		
Divis	sion of Corporations Box 6327	Division of Corpora Clifton Building		
	hassee, FL 32314	2661 Executive Cen	ter Circle	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(None of the 1 !	UNCOAST BERRY, LL	<u>U</u>	
(Name of the Limited	d Liability Company as it now app A Florida Limited Liability Compan	y)	
The Articles of Organization for this Limited L Florida document numberL1000000		January 22, 2010	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability company	<u>here</u> :	
The new name must be distinguishable and end wi'L.L.C."	th the words "Limited Liability Cor	npany," the designation "l	LLC" or the abbreviation
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREE	CE ADDRESS		
F.,4			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/ registered agent and/or the new registered or		our records, <u>enter (</u>	the name of the new
Name of New Registered Agent:	Cynthia Merrell		
New Registered Office Address:	2228 Harbor View Drive		
		Enter Florida street ada	ress
	Dunedin	, Florida	34698
	City		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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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
MGRM	Peter J Myers	2228 Harbor View Drive Dunedin, FL 34698	Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter change(s	here: (Attach additional sheets, if necessary.)	_
			-
Dated	September 2 2010	<u> </u>	_
Dateu	, <u>2010</u>	Luce	
	() Cy	authorized representative of a member	
	Typed or	printed name of signee	

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Filing Fee: \$25.00