

Division of Corporations **Electronic Filing Cover Sheet**

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C. LEWIS

FEB 2 3 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2010 FEB 22 AM & 40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WEST COAS					
(Name of the Limited	Liability Compa Florida Limited I	ny as it now ar Jability Compa	npears on or my)	r records.)	
The Articles of Organization for this Limited Li	ability Company	were filed on	Febru	ary 10,	2010 and assigned
Florida document number <u>L10000015971</u>	······································				
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liab	ility company	<u>y here</u> :		
N/A					
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Co	ompany," th	designation	n "LLC" or the abbreviation
Enter new principal offices address, if applic	able:	N/A	,, <u></u>		
(Principal office address MUST BE A STREE	T ADDRESS)				
- W W W W		 .			
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE)	<u>30X)</u>				
				 -	
B. If amending the registered agent and/or the new registered agent and/or the new registered of			on our rec	ords, <u>ente</u>	r the name of the nev
Name of New Registered Agent:	N/A				
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	·	77 . 77		1.7
	Enter Florida street address				
			 	_, Florida	
		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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member heing added or removed from our records:

MGR = Manager MGRM = Managing Member

THE	Name	Address	Type of Action
MGRM	James C. Borst	2894 Deer Run N. Clearwater, FL 33761	KAdd ☐ Remove
MGRM	Gary R. Tyler	244 Sheffield Circle W. Palm Harbor, FL 34683	KAdd Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	-
	Signature of a member of	authorized representative of a member	ZIIII FEB 22 M & LATE
<u>(</u>	Signature of a member of fames C. Borst Managing Member Typed or	Gary R Tier Managing Member printed name of signee	ORIDA

Page 2 of 2

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