L10000112815

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(Address)					
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(City/State/Zip/Phone #)					
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B. BOSTICK
MAY - 2011
EXAMINER

COVER LETTER

TO:	Registration Sec Division of Corp		•				
SUBJ	ECT:	FLORIDA COAS	STAL SURVEYING, LL	С			
		Name of Lim	ited Liability Company				
The er	nclosed Articles of A	mendment and fee(s) are su	bmitted for filing.				
Please	return all correspon	dence concerning this matte	r to the following:				
		J	ODIE CONGDON, EA		_		
			Name of Person				
		PALM TR	EE TAX & CONSULTING	INC			
			Firm/Company		-		
		2	2912 BEE RIDGE RD		5		
			Address		, VIII SECI	11 A	
		9	SARASOTA, FL 34239		新兴 表表	APR 2	
			City/State and Zip Code		- 33SE	CO	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			@PALMTREETAX.COM		T ₀	下 三 二	77
			to be used for future annual report noti	fication)	92 2	 ::	
For fu	ther information cor	ncerning this matter, please of	call:		E D A	1-	
	JODIE C	CONGDON, EA	at (941) Area Code & Daytin	921-7256			
	Name of t	Cison	Area Code & Daytin	ie Telephone Numbe	i.		
Enclos	ed is a check for the	following amount:					
\$2 5	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	i) Certified	ate of Sta		osed)

MAILING ADDRESS:

TO:

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

FLORIDA CC (Name of the Limited Liabil	DASTAL SURVEYING	LLC	
(A Florid	ity Company as it now appears (a Limited Liability Company)	m our records.)	
The Articles of Organization for this Limited Liability Florida document numberL10000112815	Company were filed on	10/28/10	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:		
PARK COA	STAL SURVEYING LLC		
The new name must be distinguishable and end with the w 'L.L.C."	ords "Limited Liability Company		LC" or the abbreviation
Enter new principal offices address, if applicable:		<u>D</u>	Parameter Comment
Principal office address MUST BE A STREET ADL	ORESS)	C/	1 C *
			F 72 111
	-	Ç	- 5 - 5
Enter new mailing address, if applicable:		Ū.	
Mailing address MAY BE A POST OFFICE BOX			
The state of the s	 		
B. If amending the registered agent and/or reging segistered agent and/or the new registered office ad	stered office address on our dress here:	records, enter t	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	City	, <u></u>	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 being added or removed from our records:

MGR = Manager

MGRM = N	Managing Member		
Title	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			AddRemove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter	1	APR 28 PH :
			ATE.
Dated	APRIL 19 ,	$\frac{2011}{2}$	
	Signature of a r	nember or authorized representative of a member	
		CHARLES PARK	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00