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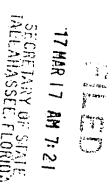
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## COVER LETTER

TO:		istration Se sion of Cor			-
SUBJE		COAST BL	JSINESS SERVICES, LLC		
SUBJE	C1.		Name of Lim	ited Liability Company	
The enc	losed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn	ali correspo	ndence concerning this matter	to the following:	
			Don Rider		
				Name of Person	
			Coast Business Services, L	LC	
			<del> </del>	Firm/Company	
			100 S Pace Blvd		
				Address	
			Pensacola, FL 32502		
				City/State and Zip Code	
			donrider@ecbservice.com		
For furt	her in	formation c	E-mail address: ( oncerning this matter, please co	to be used for future annual report n	otification)
Don Ri			, <b>-</b>	850 475-1555	
<del></del>		Name o	f Person	at () Area Code Day	time Telephone Number
Enclose	ed is a	check for th	ne following amount:		
□ <b>\$</b> 25	.00 Fi	ling 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)
		Registra Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Coast Business Services, 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  $\frac{12/01/2010}{12000}$ and assigned Florida document number L10000123627 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Avaion CPAs, LLC The new name must be distinguishable and contain 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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