L11000019896

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
APR -1 2010

Office Use Only

EXAMINER



200199784002

03/30/11--01018--010 **30.00

2011 HAR 30 PM 12: 3

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Guff Coast Premier Promotions, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cynthia Tant
Gulf Coast Premier Promotions, LLC
17 S. Palafox PL #304
Pensocola FL 32502 City/State and Zip Code Cod
For further information concerning this matter, please call:
Name of Person at (80) 993-5137 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{\$30.00 Filing Fee & Certificate of Status} \text{\$55.00 Filing Fee & Solutional Copy is enclosed} \text{\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$25.00 Filing Fee & Solutional Fee & Certified Copy (additional copy is enclosed)}

MAILING ADDRESS: 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	1	
$0.160 \pm l_0$	· ' ' ' ' '	1, 1,0	
(JULT CORS) TR	emuer Iroma	runs, ac	
(Name of the Limited Liability Comp	pany as it now appears on our record I Liability Company)	<u>s.</u>)	
·	_1 _1	• .	
The Articles of Organization for this Limited Liability Compar	ny were filed on 215	and assigned	
Florida document number L 110000 1989 (6		
	r		
This amendment is submitted to amend the following:			
This amendment is submitted to amend the following.			
A. If amending name, <u>enter the new name of the limited lia</u>	ability company here:		
The new name must be distinguishable and end with the words "Lin"L.L.C."	mited Liability Company," the designat	tion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Timepa Office united most be A STREET ADDITION	-	THE TO	
		60% W	
Enter new mailing address, if applicable:		The state of the s	
(Mailing address MAY BE A POST OFFICE BOX)			
		ယ	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address how registered office address how registered office address how registered office address how registered of the registered of th		nter the name of the new	
egistered agent and/or the new registered office address in	<u>ne</u> .		
Name of New Registered Agent:			
New Registered Office Address:			
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action			
MER	Robert M Ford	Po Box 48Z Pengacolo, PC 30591	Add			
MGR	Justin W King	915 Perry Are Persacola, FC 32503	Add Remove			
<u>NGR</u> NGL	Terry Brooks	5904 Forest Ridge Cir. Rensacola, Fr 32526	Add Remove			
<u>ver</u>	Jennifor Harrison	1 5428 FUNTWOODER	Add			
		\$	Add Remove			
		T T	Add Particove			
D. If amendin	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	_			
			- - -			
			_			
Dated 3	25/11 Julia	Vant	· · · · · · · · · · · · · · · · · · ·			
Signature of a member or authorized representative of a member Typed or printed name of signee						

Page 2 of 2

Filing Fee: \$25.00