

L110000064856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

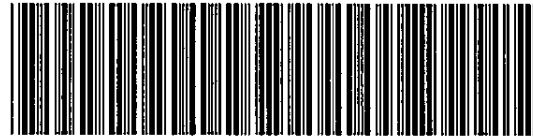
(Business Entity Name)

(Document Number)

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STATE  
TALLAHASSEE, FLORIDA

N. Culligan JAN 31 2014



REPLY TO:  
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January 24, 2014

OF COUNSEL  
MICHAEL L. FERGUSON  
WILLIAM J. GREEN  
(1943-2012)

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Emerald Coast Express of Northwest Florida, LLC  
Our File No. JPK-13-7797

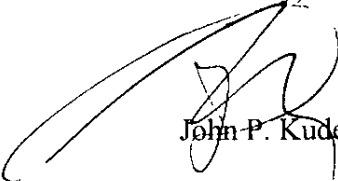
To Whom It May Concern:

Enclosed please find the following for filing in the referenced file:

1. Cover letter;
2. Articles of Amendment to Articles of Organization; and
3. Our check in the amount of \$55.00 for the filing/certified copy fee;

Thank you for your assistance and if you have any questions or require additional information, please let us know.

Sincerely,



John P. Kuder

JPK/dlc  
Enclosures

cc: Emerald Coast Express of Northwest Florida, LLC

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Emerald Coast Express of Northwest Florida, 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:

Jean Gardner

Name of Person

Emerald Coast Express of Northwest Florida, LLC

Firm/Company

1150 Ft. Pickens Road, #C3

Address

Gulf Breeze, FL 32561

City/State and Zip Code

Jean@EmeraldCoastX.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jean Gardner

Name of Person

at ( 850 ) 777-7633

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing 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)

**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**

FILED  
2014 JAN 30 PM 11: 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Emerald Coast Express of Northwest Florida, 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 6/2/11 and assigned  
Florida document number L11000064856.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with 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)

1150 Fort Pickens Road

#C3

Gulf Breeze, FL 32561

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

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 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

**MGR=** Manager  
**AMBR=** Authorized Member

Page 2 of 3

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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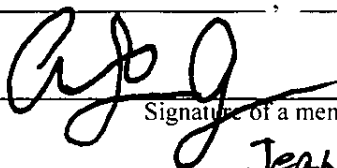
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated January 21, 2014.



Signature of a member or authorized representative of a member

Jean Gardner

Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA