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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)	
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(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only



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05/03/12--01022--008 **25.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Coastal Shell Mulch Luc 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:	
Shawn Sundall Name of Person	
$oldsymbol{\cdot}$	
Environolch Firm/Company	
Firm/Company	
1040 Collier Center Way Ste. 5	
Address	
Naples FL 34110 City/State and Zip Code 5. Sundall 40 gma, 1.com E-mail address: (to be used for future annual report notification)	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (239) 682-6149 Area Code & Daytime Telephone Number	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$60.00 Filing Fee, \text{Certified of Status & Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$\$ \$60.00 Filing Fee, \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$	sed)

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 ARTICLES OF ORGANIZATION **OF**

FILED

Coastal S	Shell Mulch	LLC.	12 MAY -3 PM "1: 52	
(Name of the Limited Li (A F)	ability Company as it no orida Limited Liability Co	w appears on our recompany)	TALEAHASSEE, FLORIDA	
The Articles of Organization for this Limited Liab Florida document number	ility Company were filed	i on 3/8//	2 and assigned	
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	ne limited liability comp	oany here:		
Environouch	1 LLC			
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liabili	ty Company," the desi	gnation "LLC" or the abbreviation	
Enter new principal offices address, if applicab	le:			
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered offic	0	ess on our records	s, enter the name of the new	
Name of New Registered Agent:			<u> </u>	
New Registered Office Address:				
	Enter Florida street address			
		, FI	lorida	
	City		Zip Code	
New Registered Agent's Signature, if changing Reg	<u>istered Agent:</u>			

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	
			Add Remove	
			 ∏ Add	
			Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add	
D. If amer	nding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	ary.)	
_			12 MAY	
_			Y-3 PH 1: 52	
Dated	4 , 25/	1242	52 NBA	
	Shawn S	f or authorized representative of a member		
	Tyned	or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00