## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : RICHARD G. COKER, JR., P.A.

Account Number : I20010000145 Phone : (954)761-3636 Fax Number : (954)761

\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please

rgcoker@coker-feiner.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COCONUT ISLE HOLDINGS, LLC

Certificate of Status	0
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Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COCONUT ISLE HOLDINGS, LLC				
(Name of the Limited Liability Company (A Florida Limited Lia	y as it new appears on our records.) ability Company)			
The Articles of Organization for this Limited Liability Company w Florida document number 112000005774	vere filed on 01/12/2012	aı	nd assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ty company here:			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	abbreviati	ion "L.L	.C."
Enter new principal offices address, if applicable:				· .
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:		<u>j.                                    </u>		
(Mailing address MAY BE A POST OFFICE BOX)		5.5	6	<del></del>
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B. If amending the registered agent and/or registered offle registered agent and/or the new registered office address here:	ce address on our records, <u>ent</u>	r the n	ame of	f the new
		101 101 110	څ	
Name of New Registered Agent:		<u> 87</u>	<del>-</del>	
New Registered Office Address:				
•	Enter Florida street address			
	City, Florida	Zin	Code	<del></del>
New Registered Agent's Signature, if changing Registered Agent:		-7		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of my duties, and I an ovided for in Chapter 605, F.S. C	n familia r, if this	r with docum	and nent is

If Changing Registered Agent, Signature of New Registered Agent

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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 AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Megan Elizabeth Coker	1404 S. Andrews Avenue	<b>□</b> Add
		Ft. Lauderdale, FL 33316	□ Remove
			□ Change
MGR	Kathryn R. Coker	1404 S. Andrews Avenue	<b>a</b> dd
		Ft. Lauderdale, FL 33316	☐ Remove
***************************************			Change
			SSE Character Ch
			□ Remove
			Change
<del></del>			□ Add
			☐ Remove
			Change
			Add
		<u></u>	□ Remove
			☐ Change

From: COKER & FEINER

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ective date, if other than the date of filing: (option effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after	t <b>ional)</b> er filing.) Pursuar	nt to 605.02
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record specifies a delayed effective date, but not an effective time, at 12:01 he 90th day after the record is filed.	a.m. on the	earlier
November 10 2016		
red Avisinos 10		
Signature of a member of authorized representative of a member	<u> </u>	
signature of a member of adjustized representative of a member		

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