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(Re	equestor's Name)	
, (Ad	ldress)	
(Ad	dress)	
, (Cit	ty/State/Zip/Phone	e #)
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EXAMINER



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12 OCT 23 PH 3: 40
TALLAHASSEE, FLORIDA

12 OCT 29 PH 3: 40
SECNETAN OF STATE
AND AHASSEE, FLORIC

COVER LETTER

TO:

Registration Section

Division of Co	rporations :		
SUBJECT:	Gulfcoast Rea	alty & Auction L.L.C.	"e i ^{ger} ij
SUBSECT.		ted Liability Company	
	•		
The enclosed Articles of	`Amendment and fee(s) are sub	mitted for filing.	
•	•		
Please return all correspondence	ondence concerning this matter	to the following:	10 m
•		:	Alle
		Denise A Joyce	
		Name of Person	;
	Gulfcoa	ast Realty & Auction, L.L.C.	
		Firm/Company	 -
,	169	31 Del Prado Blvd #407	•
	100	Address	
		Address	2
•	C	Cape Coral, FL 33990	
		City/State and Zip Code	
	den	ise@gulfcoastcoin.com	
	E-mail address: (to be used for future annual report notification	n)
For further information	concerning this matter, please of	all:	
De	enise A Joyce	at (239) 218	J-5678
	of Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			•
•		• •	
	LING ADDRESS:	STREET/COURIER	ADDRESS:
Registration Section Division of Corporations		Registration Section Division of Corporation	ns.
	Box 6327	Clifton Building	
	nassee, FL 32314	2661 Executive Center Tallahassee, FL 32301	Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ART	ICLES OF AM	ENDMENT		
***	TO			
ARTIC	CLES OF ORG	ANIZATION		A. S. C. Marke
	. OF		•	
	_			THE WASHINGTON
GULFCOAS+ 1	Cepty + A	tuctions	LLC	
(Name of the Limited (A	Liability Company as Florida Limited Liabil	it now appears on ity Company)	our records.	
χ		,,		(037) O
The Articles of Organization for this Limited Lia	bility Company wer	e filed on	1/23/2012	and assigned
Florida document numberL12000107	45			•
^				
This amendment is submitted to amend the follo	wine:			
. This difference is submitted to different the folio	*******			
A. If amending name, enter the new name of	the limited liability	company here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limited L	iability Company,"	the designation '	LLC" or the abbreviation
Enter new principal offices address, if applica	ble:			.
(Principal office address MUST BE A STREET	<u> ADDRESS)</u>			
	· <u> </u>			
Enter new mailing address, if applicable:		•		
(Mailing address MAY BE A POST OFFICE I	BOX) -	·		•
			-	
B. If amending the registered agent and/o	r registered office	address on our	records, <u>enter</u>	the name of the new
registered agent and/or the new registered off	ice address here:			
Name of New Registered Agent:	Bruce Scott	,		<u> </u>
New Registered Office Address:	1631 Del Prado	Blvd #407		
Enter Florida street address				
	Cape	e Corai	, Florida	33990
	Ci			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 dutien and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 60%/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>	<u>Name</u>	Address	Type of Action
MGRM	John Smit O III	1631 Del Prado Av #407 Cape Coral, FL 33990	Add Remove
MGRM	Bruce Scott	1631 Del Prado Av #407 Cape Coral, EL 33990	_ ✓ Add ☐ Remove
			Add Remove
			Add Remove
			AddRemove
<u> </u>			Add Remove
D. If amend	ling any other information, end	ter change(s) here: (Attach additional sheets, if necessary.)	-
_			_
			_
Dated	October 20	2012	·
	Signature of	a member or authorized representative of a member	
		Denise A Joyce Typed or printed name of signee	
		- y F P	

Page 2 of 2

Filing Fee: \$25.00