

L/2000059988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

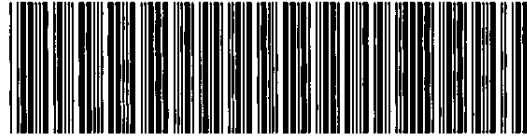
(Business Entity Name)

(Document Number)

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B. BOSTICK
AUG 20 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

FL East Coast Property, 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:

Scott Stamatakis
Name of Person

Stamatakis + Thalji + Bonanne
Firm/Company

13904 N. Dale Mabry Hwy, Ste 301
Address

Tampa, FL 33618
City/State and Zip Code

myinjury@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Stamatakis at (813) 282-9330
Name of Person 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

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12 AUG 17 PM 5:28
TALLAHASSEE, FLORIDA

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

FL East Coast Property, 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 5/3/12 and assigned
Florida document number L12000059988

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)

1806 N. Franklin Street
Tampa, FL 33602-2234

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1806 N. Franklin Street
Tampa, FL 33602-2234

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:

Stamatakis & Thalji, PC

New Registered Office Address:

13904 N. Dale Mabry Hwy, Ste 301

Enter Florida street address

Tampa
City

Florida

33618
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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Daniel Berman	600 SW 4th Avenue Fort Lauderdale, FL 33315	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Basem Ali	1806 N. Franklin Street Tampa, FL 33602-2234	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated _____,

Signature of a member or authorized representative of a member

Scott Stamataki's - Attorney at Law
Typed or printed name of signee

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TAMPA, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2012

SCOTT STAMATAKIS
STAMATAKIS & THALJI & BONANNO
13904 N. DALE MABRY HWY., SUITE 301
TAMPA, FL 33618

SUBJECT: FL EAST COAST PROPERTY, LLC
Ref. Number: L12000059988

We have received your document for FL EAST COAST PROPERTY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 312A00020586

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