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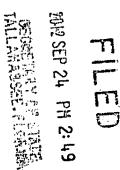
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J. BRYAN

SEP 2 5 2012

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section , Division of Corporations
SUBJECT: DE GRORGA CASTAL LC  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:
SEANT. HORAN Name of Person
DE GEORGE COASTAL LLC Firm/Company
DEGEORGE CASTAL CCC Firm/Company  680 Kingsky Avenue Address
Orang R Pack, H. 32073 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SEAN HORAN at (904) 644.6400  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  \$25.00 Filing Fee & Certified Copy (additional copy is enclosed)  \$25.00 Filing Fee & 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

DASTAL, LL	<u></u>	
Company as it now appears of imited Liability Company)	on our records.)	
ompany were filed on	1/6/12	and assigned
ted liability company here:		
ds "Limited Liability Company	," the designation "LL	C" or the abbreviation
ESS)		
		FILL SEP 24
		3
evad office address on our	w wasands, anton the	2 name of the new
ress here:	r records, enter the	s name of the new
F	F1 1 1 11	
Enter Fioriaa street address		
City	, Florida	Zip Code
	ered office address on our ess here:	ded liability company here:  des "Limited Liability Company," the designation "LL  ESS)  ered office address on our records, enter the ess here:  Enter Florida street addre

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 **Title** <u>Name</u> **Address Type of Action** MGR DEGRORGE Enterpriso, Inc. MGR COASTAL Spacialty Solutions, Inc □□dd \_\_\_emove emove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00