L12000113396

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Document Number)		
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
·		

Office Use Only

B. KOHR
DEC 28 2012
EXAMINER



500242937015

12/26/12--01049--008 **25.00

12 DEC 26 PM 3: 40
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

CASUAL COASTAL INVESTMENTS 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:

Craig Lane

Name of Person

CASUAL COASTAL INVESTMENTS LLC

Firm/Company

954 S. Orlando Ave.

Address

Winter Park, FL 32789

City/State and Zip Code

craigscottlane@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Craig Lane

{...}813\774-3333

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

W

2 DEC 26 PH 3: LO

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CASUAL COASTAL INVESTMENTS 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 09/04/2012	and assigned
Florida document number L12000113396		and assigned
		THE STATE OF THE
This amondment is submitted to amond the following.		S. 2
This amendment is submitted to amend the following:		The state of the s
A. If amending name, enter the new name of the limited liab	ility company here:	3: 40
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designa	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	954 S. Orlando Ave.	-
(Principal office address MUST BE A STREET ADDRESS)	Winter Park, FL 32879	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	954 S. Orlando Ave.	
(Mailing address MAY BE A POST OFFICE BOX)	Winter Park, FL 32879	
Mulling uddress MAT BE A FOST OFFICE BOAT	7701101110111,11202010	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered of	fice address on our records o	enter the name of the new
registered agent and/or the new registered office address her		tifet the name of the new
	_	
Name of New Registered Agent:		
New Registered Office Address:	F.A. Planta and	
	Enter Florida str	eet aaaress
	, Flor	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		

If Changing Registered Agent, Signature of New 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.

Docombor 19	
Docombor 19	
Docombor 19	
Docombos 19	
Doomhor 19	
Docombor 10	
December 18,	2012
Where	
<i>/</i> -	member or authorized representative of a member
Craig Lane	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00