

✓
L12000119444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300241512993

11/09/12--01011--008 **25.00

FILED
12 DEC -4 PM 3:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

DEC - 5 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **AltaVista Technology Fund, 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:

Marc C. Ricker

Name of Person

Blue Coast Companies

Firm/Company

110 E Atlantic Avenue, Suite 400A

Address

Delray Beach, Florida 33444

City/State and Zip Code

marc@blue-coast.com

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

For further information concerning this matter, please call:

Marc C. Ricker

Name of Person

at **859 2270808**

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

FILED
12 DEC -4 PM 3:45
TALLAHASSEE, FLORIDA

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

AltaVista Technology Fund, 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 9/18/2012 and assigned
Florida document number ~~L12000110444~~

L12000119444

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Blue Coast Capital, LLC

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)

110 E Atlantic Avenue, Suite 400A

Delray Beach, Florida 33444

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

110 E Atlantic Avenue, Suite 400A

Delray Beach, Florida 33444

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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

FILED
12 DEC -4 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

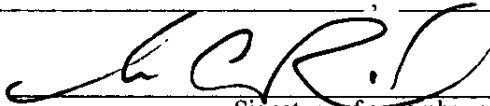
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 DEC - 4 PM 3:45

FILED

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

MARC C. RICKER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED

12 DEC -4 PM 3:45

CLERK OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 13, 2012

MARC C. RICKER
BLUE COAST COMPANIES
110 E. ATLANTIC AVENUE, SUITE 400A
DELRAY BEACH, FL 33444

SUBJECT: TODD CHRISTIAN, LLC
Ref. Number: L12000110444

Altavista Technology Fund, LLC

We have received your document for ~~TODD CHRISTIAN~~, 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 document must be signed by a member or an authorized representative of a member.

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: 812A00027415