## 112000 138327

, (Reque	estor's Name)	
(Addre	ss)	
(Addre	ss)	
(City/S	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busin	ess Entity Name)	
(Docur	nent Number)	_
Certified Copies	Certificates of Sta	atus
Special Instructions to Fili	ng Officer:	

Office Use Only



500315729725

07/16/18--01015--001 \*\*50.00

FILED

SECRETARY OF STATE
SECRETARY OF STATE

O SIMPLE ONS

## **COVER LETTER**

TO: Registration Division of C			
Souther SUBJECT:	n Beach Real Estate and Rer	ital, Ilc	
<del></del>	Name of Lir	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
,	Ashley Kohls		
·		Name of Person	Person  Itals, LLC Impany  Itals, LC Impany  Itals annual report notification  Itals annual report notificat
	Name of Limited Liability Company  Inclosed Articles of Amendment and fee(s) are submitted for filing.  The return all correspondence concerning this matter to the following:  Ashley Kohls  Name of Person  Southern Beach Real Estate and Rentals, LLC  Firm/Company  48 Rayhand Circle  Address  Santa Rosa Beach, FL 32459  City/State and Zip Code  ashley@southernbeacher.com  E-mail address: (to be used for future annual report notification)  orther information concerning this matter, please call:  (Quinlan)  850  865-3500		
		Firm/Company	<del> </del>
	48 RAYMING	CIRCLE	
		Address	
	Santa Rosa Beach, FL (	32459	
		City/State and Zip Code	
			fication)
For further information	concerning this matter, please ca	all:	
Linda Quinlan			
Name	Firm/Company  48 RAYHIND CIRCLE  Address  Santa Rosa Beach, FL 32459  City/State and Zip Code  ashley@southernbeachre.com  E-mail address: (to be used for future annual report notification)  ther information concerning this matter, please call:  Quinlan  850 865-3500  at (		
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &

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

Southern Beach Real Estate ar	nd Rentals, LLC			
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited I Florida document number L12000138327				and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	_	oility company hero	<u>e</u> :	
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the desi	ignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	48 Raymond Circ	cle	
(Principal office address MUST BE A STREET ADDRESS)		Santa Rosa Bea	ch, FL 32459	4,0 6
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	P.O. Box   34 Santa Rosa Bead	·	THE DE STATE OF SAME
B. If amending the registered agent and/ registered agent and/or the new registered of	or registered of Tice address here	fice address on o	ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:	Ashley Kohls			
New Registered Office Address:	48 Raymond C			
	_		street address	***************************************
	Santa Rosa Be	· · · · · · · · · · · · · · · · · · ·	, Florida <u>32</u>	
		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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Ashley Kohls	48 Raymond Circle	<u> </u>
		Santa Rosa Beach, FL 32459	
			Remove
AMBR	Greg Kohls	0000	
	Oreg Kons	3255 Burnt Pine Cove	□ Add
		Miramar Beach, FL 32550	□ Remove
			■ Change
AMBR	Linda Quinlan	110 My Way Circle	
		Santa Rosa Beach, FL 32459	
			■ Change
			Remove SECR
			SECHELLARY OF Add
			PA PA Remove
			Change
<del></del>			🗆 Add
			□ Remove
			Change

				<del>,</del> .				
		<del></del>						
			<u>- 11 - 1</u>					
	<del></del> -					·	····	
	<del></del>		<u> </u>			<del></del>		
	<del></del>	<del></del>		<u>.                                    </u>		·		
		<del></del>						
								-
•						·	······································	
				<u></u>				
-		<del></del>	<del></del>					<b></b>
	·						THE SE	Ď "
							L'ACT	
		*******	·	~ <del>~~</del>		<del>-</del>	- <del>5</del> 2	-20 /W
	<del></del>	<u>.                                    </u>		<u> </u>	<del>-</del>	<del> </del>	<u> </u>	-3º (
	·		·	<del></del>			- 6	- K
		· · · · · · · · · · · · · · · · · · ·					102	6
	<del></del>			<del></del>				
ffective date, if other than the date	of filing:					(optiona	h	
an effective date is listed, the date must be silote: If the date inserted in this block document's effective date on the Department.	occific and ca	innot be prio	or to date o	f filing or mo	re than 00 des			to 605.0207
ocument's effective date on the Depart	nent of Stat	te's records	s.	diory iming	requiremen	15, 11115 QA	ie will not	be usted as
o record enositing a deleted ser			_					
e record specifies a delayed effor The 90th day after the record i	ective dat s filed,	ie, but no	ot an ef	fective ti	me, at 12	:01 a.m	on the	earlier of
h.i 40								
ated		2018	·					
1 Adagoula	DIOR							
J ashley Ka	ture of a mer	nber or auth	orized rep	resentative o	f a member			<del></del> -
Ashley Kohls								

Page 3 of 3

Filing Fee: \$25.00