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| (Red | uestor's Name) | |
|---------------------------|------------------|-------------|
| (Add | ress) | |
| (Add | lress) | |
| (City | /State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Nar | me) |
| (Doc | ument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to F | iling Officer: | |
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Office Use Only



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COVER LETTER

TQ:

Registration Section
Division of Corporations

SUBJECT:

Gulf Coast Custom Millworks, 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:

Sarah Ann Zehr

Name of Person

Gulf Coast Custom Millworks, LLV

Firm/Company

7682 Manatee Street

Address

Navarre, Florida, 32566

City/State and Zip Code

zehrs@bellsouth.net

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

For further information concerning this matter, please call:

Sarah A Zehr

Name of Person

__850\3**93-7311**

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Gulf Coast Custom Millworks | | |
|--|---|---|
| (<u>Name of the Limited Lis</u> (A Flo | ability Company as it now appears on our repride Limited Liability Company) | ecords.) |
| The Articles of Organization for this Limited Liabi | | |
| This amendment is submitted to amend the followi | | |
| The new name must be distinguishable and end with the "L.L.C." | ne words "Limited Liability Company," the de | esignation "LLC" or the abbreviation |
| Enter new principal offices address, if applicabl | e: | |
| (Principal office address MUST BE A STREET A | ADDRESS) | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO | <u></u> | 2819 JUN-7 PH SECRETARY OF THE AFRASSES A |
| B. If amending the registered agent and/or registered agent and/or the new registered office | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida | la 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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | Name | Address 3 | Type of Action |
|--------------|---------------|----------------------|----------------|
| mgrm | Daniel R Zehr | 7496 Harvest Village | Add |
| | | Navarre, Fl 32566 | Remove |
| | | | - |
| | | | _ L Add |
| | | | _ Remove |
| | | | Add |
| | | | Remove |
| | | · | ∏ Add |
| | | ELAHASSE | Remove |
| | | E FLORIDA | Add Remove |
| | | | |
| | | | Add |
| | | | Remove |
| | | | |

| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) I am making Danel R Zehr a 10% managing member of |
|--|
| Gulf Coast Custom Millworks, LLC |
| Doc #LI3000056031 |
| |
| Dated June 6, 2013 |
| Sarah Oun Zelv |
| Signature of a member or authorized representative of a member Sarah Ann Zehr Typed or printed name of signee |
| Page 3 of 3 |

rage 3 of 3

Filing Fee: \$25.00

