# 43000089869

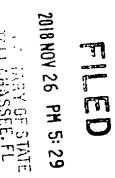
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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C. GOLDEN
DEC - 3 2618

# **COVER LETTER**

Division of Corporate			
SUBJECT: BEAC	1451DE VEN- Name of Limit	TURES LLC.	<del></del>
The enclosed Articles of Amer	ndment and fee(s) are subn	nitted for filing.	
Please return all correspondent	ce concerning this matter to	o the following:	
_	JULIE 1	Name of Person	
_	CASTALIA	BEACH BE	210
_	13437 GULI	- BLVD Address	
	MADEIRA	BEACH, FL 33 City/State and Zip Code	708_
	E-mail address: (to	69 P Gmail Cambo be used for future annual report notifica	tion)
For further information concer	ning this matter, please cal	li:	
Thur Audi	off .	at ( <u>D)</u> 693- Area Code Daytime To	- 775 O elephone Number
Enclosed is a check for the fol	lowing 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)

MAHLING 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**

FILED

2018 NOV 26 PM 5: 29

SECUL LARY OF STATE

BEACHS (IX) VENT (Name of the Limited Liability Compa (A Florida Limited I	TURES LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)ability Company)	
The Articles of Organization for this Limited Liability Company	were filed on $6/31/13$	and assigned
Florida document number <u>L1300089869</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil		
Enter new principal offices address, if applicable:	Castaway Band 13437 GULF BI	h Bar
(Principal office address MUST BE A STREET ADDRESS)	13437 GULF BI	-V-ID
	MADEIRA BER	CH, FL 33708
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the name of the new
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
New Registered Agent's Signature, if changing Registered Agent:	•	zip Grae

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 Type of Action Address <u>Title</u> Name | ERIC ANOT MGR ST Pete FL. 33716 ☐ Change AMBR JULIE AUDTO ☐ Remove MADEIN. BEACH 13437 Gulf BLVD Change □ Add ☐ Remove \_□ Change ☐ Add ☐ Remove \_□ Change \_□ Add ☐ Remove □ Change □ Add ☐ Remove ☐ Change

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veffective dat <u>te:</u> If the da	e, if other than t te is listed, the date r ate inserted in this fective date on the	must be specifi ; block does i	c and cannot l not meet the	be prior to date applicable s	of tiling or m	ore than 90 day g requiremen	s after filing	.) Pursuant to 0	505.0207 isted as
	pecifies a delay day after the r			out not an	effective t	ime, at 12	:01 a.m.	on the ea	rlier of
ted	15		_, <u> </u>	018.					
Z		Signature	of a member	or authorized	representative	of a member			

Page 3 of 3

Filing Fee: \$25.00