

113000109055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

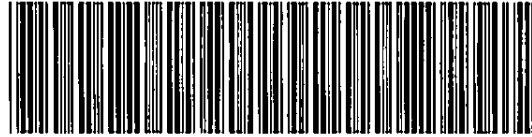
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Sign

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07/24/17--01019--013 \*\*60.00

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2017 AUG 18 PM 2:15  
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K SALY  
AUG 22 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 28, 2017

GULF COAST SPORTS AE & S LLC  
ASHLEY ACKERMAN  
6752 W GULF TO LAKE HWY, STE. 423  
CRYSTAL RIVER, FL 34429

SUBJECT: GULF COAST SPORTS AE&S LLC  
Ref. Number: L13000109055

RECEIVED  
2017 AUG 18 PM 5:17  
TALLAHASSEE, FLORIDA

We have received your document for GULF COAST SPORTS AE&S LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 117A00015292

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Gulf Coast Sports AE & S 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:

Ashley Ackerman

\_\_\_\_\_  
Name of Person

Gulf Coast Sports AE & S LLC

\_\_\_\_\_  
Firm/Company

6752 W Gulf to Lake Hwy Suite 423

\_\_\_\_\_  
Address

Crystal River, FL 34429

\_\_\_\_\_  
City/State and Zip Code

Bleachers@GulfCoastSportsFL.com

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

For further information concerning this matter, please call:

Ashley Ackerman

855 827-1386  
at ( )

\_\_\_\_\_  
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

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

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2017 AUG 18 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Gulf Coast Sports AE & S 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 8/1/2013 and assigned  
Florida document number L13000109055.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

6752 W Gulf to Lake Hwy Suite 423 Crystal River, FL 34429

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

6752 W Gulf to Lake Hwy Suite 423 Crystal River, FL 34429

(Mailing address MAY BE A POST OFFICE BOX)

**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:

Ashley Ackerman

New Registered Office Address:

6752 W Gulf to Lake Hwy Suite 423

*Enter Florida street address*

Crystal River

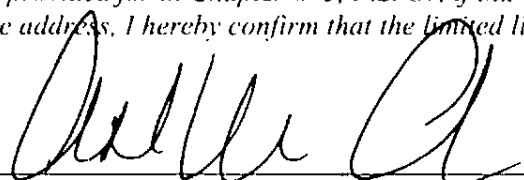
*City*

Florida 34429

*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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PR	Ashley Ackerman	6752 W Gulf to Lake Hwy	<input type="checkbox"/> Add
		Suite 423	<input type="checkbox"/> Remove
		Crystal River, FL 34429	<input checked="" type="checkbox"/> Change
MGR	Cindy Lewis	6040 W Pine Cir	<input type="checkbox"/> Add
		Crystal River, FL 34429	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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 COUNTY CLERK  
 HIGHLAND COUNTY  
 FLORIDA

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

When filing our Annual Report online I entered in the address as "6752 W Norvell Bryant Hwy" when in fact that is incorrect, the address, for all lines is "6752 W Gulf to Lake Hwy Suite 423". Please change/ update any addresses that are incorrect, including the address listed for the Registered Agent. Thank you.

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STATE OF ALABAMA  
SPECIAL SERVICE UNIT

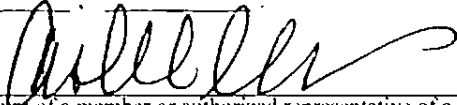
**E. Effective date, if other than the date of filing:** 8/1/2017 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated June 21 2017



\_\_\_\_\_  
Signature of a member or authorized representative of a member

Ashley Ackerman/ President

\_\_\_\_\_  
Typed or printed name of signee