L1300013105b

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COVER LETTER

TO: Registration Se Division of Cor	ction. porations	The second secon				
	s Vacation Rentals, LLC					
SUBJECT:		ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	endence concerning this matter	to the following:				
	Jordan Gunnell & Keldrin	Love				
	Name of Person					
	Coastal Bay Investors					
	Firm/Company					
	PO Box 1031					
		Address				
	Port Saint Joe, FL 32457					
		City/State and Zip Code				
	info@coastalbayinvestors.com					
	E-mail address: (to be used for future annual report notif	fication)			
For further information c	oncerning this matter, please ca	all:				
Jordan Gunnell		850 203-3203				
Name o	f Person	at () Area Code Daytime	e Telephone Number			
Enclosed is a check for th	ne following amount:					
■ \$25.00 Filing Fee	S30.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

2020 J. -2 PH 6: 08 Sandy Shoes Vacation Rentals, LLC

(A Florida	y Company as it now appears Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Co Florida document number L13000131056		9/17/2013	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here	<u>e</u> :	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the des	ignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		·····	
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered		ords, enter the na	
agent and/or the new registered office address here:		•	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	Enter Florida street address	
	Cirv	, Florida .	Zip Code

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>	Address	Type of Action
MGR	Jordan Gunnell	1012 Woodward Avenue	□Add
		Port Saint Joe, FL 32456	■Remove
			□Change
MGR	Keldrin Love	1012 Woodward Avenue	□Add
		Port Saint Joe, FL 32456	■Remove
			□Change
MGR	Coastal Bay Investors	PO Box 1031	≣ Add
		Port Saint Joe, FL 32457	□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
		<u></u>	□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) _ (optional) E. Effective date, if other than the date of filing: (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 ______23 2019 Signature of a member of authorized representative of a member Jordan Gunnell Typed or printed name of signee

Filing Fee: \$25.00