

L14 000066502

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(City/State/Zip/Phone #)

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2014 JUN 19 PM 2:30
CLERK OF SUPERIOR COURT
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JUN 20 2014

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 9, 2014

SCOTT DOUGLAS BROWNING
1709 PINE STREET
EDGEWATER, FL 32132

SUBJECT: COASTAL LAWNS & LANDSCAPING L.L.C.
Ref. Number: L14000066502

We have received your document for COASTAL LAWNS & LANDSCAPING L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), 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.

Tammi Cline
Regulatory Specialist II

Letter Number: 214A00012324

2014 JUN 19 PM 2:30
DIVISION OF STATE
CORPORATIONS
1000 N. GULF
TALLAHASSEE, FL 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **COASTAL LAWNS & LANDSCAPING L.L.C.**
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:

SCOTT DOUGLAS BROWNING

Name of Person

COASTAL LAWNS & LANDSCAPING L.L.C.

Firm/Company

1709 PINE STREET

Address

EDGEWATER FL 32132

City/State and Zip Code

EAF TUCK@BELLSOUTH.NET

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

For further information concerning this matter, please call:

EDWARD AFTUCK

Name of Person

at **386 428-4260**

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

SECRETARY OF STATE
TALLAHASSEE, FL 32301

2014 JUN 19 PM 2:30

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

COASTAL LAWNS & LANDSCAPING L.L.C.

(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 APRIL 23 2014 and assigned
Florida document number L14000066502.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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: SCOTT DOUGLAS BROWNING

New Registered Office Address: 1709 PINE TREE

Enter Florida street address

EDGEWATER, Florida 32132

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.

Scott Douglas Browning
If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

Page 2 of 3

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 6/16/14, 2014

Michelle

Signature of a member or authorized representative of a member

Michelle Browning

Typed or printed name of signee