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PICK-UP	☐ WAIT	MAIL
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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 11, 2017

GULF COAST REFLECTIONS POOLS AND LANDSCAPING, LLC GREGG ROBERTSON 9900 S THOMAS #1133 PANAMA CITY BEACH, FL 32408

SUBJECT: GULF COAST REFLECTIONS POOLS AND LANDSCAPING, LLC

Ref. Number: L14000173299

We have received your document for GULF COAST REFLECTIONS POOLS AND LANDSCAPING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Letter Number: 017A00000675

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Corporations
SUBJECT: Gruff Coast Reflections Roots Landscaping, Lice
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gregg Robertson II Name of Person
Firm/Company
Paramon City Por in City 22/108
Parama City Reach 1 32408 City/state and Zip Code
J-glail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Crocy Robertson at (850) 8058 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & \$\Bigcup \\$55.00 Filing Fee & \$\Bigcup \\$60.00 Filing Fee, \$\Bigcup \\$certificate of Status & \$\Bigcup \\$certified Copy & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

The Articles of Organization for this Limited Liability Company were filed on ___ Florida document number 11400173299. 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 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: New Registered Office Address:

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

	Authorized Person(s) authorized to ma rom our records:	mage, enter the title, name, and address of	f each person being adde
MGR = Ma AMBR = Au	nnager ithorized Member		,
<u>Title</u>	<u>Name</u>	Address	Type of Action
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		Panana Coly Beach.	FL PRemove
		3240	O7 Change
MOR	Greggloberton I	9902 S Thomas Drate Panama City Beach	11330 Add
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	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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an effectiv lote: If th	e date, if other than the date of filing:	to 605.020 be listed a
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 0th day after the record is filed.	earlier o
ated	Signature of a member or authorized representative of a member Robert A. FAULK Typed or printed name of signee	
	Para a Faure	

Page 3 of 3

Filing Fee: \$25.00