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(Re	questor's Name)	
(Ad	dress)	
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(Su	siness Entity Name)
(Do	cument Number)	
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COVER LETTER

TO: "				
SUBJE	.СТ:	Cou 1 H	nard Enterprise	es LLC
The end	losed Articles of Ar	nendment and fee(s) are subr	nitted for filing.	
Please 1	eturn all correspond	ence concerning this matter t	to the following:	
		Robe	rt S Coulthan	-d Je
	Name of Limited Liability Company the enclosed Articles of Amendment and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following: Robert S Coulthard Je Name of Person Coulthard Enterprises LLC Firm/Company 2812 Briar cliffe Address Panama City F1 32405 City/State and Zip/Code Stan Coulthard & Vahoo. Com E-mail address (to be used for future annual report notification) or further information concerning this matter, please call: Stan Coulthard Name of Person 1 (850) Daytine Telephone Number nelosed is a check for the following amount:	ses LLC		
		2812	Briar cliffe Address	
		Pana	ama City F1.	32405
	-			
Division of Corporations SUBJECT: Coulthard Enterprises LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: Robert S Coulthard Je Name of Person Coulthard Enterprises LLC Firm/Company 2812 Briar cliffer Address Panama Ctt F1 32405 City/State and Zip/Code Stan Coulthard C Vahou Com E-mail address (to be used for future annual report notification) For further information concerning this matter, please call: Stan Coulthard Name of Person at (850) 896-1075 Daytime Telephone Number Inclosed is a check for the following amount: Cinclosed is a check for the following amount: Circlificate of Status Certified Copy (additional copy) sentesset)				
	Stan (but) Name of Po	thard rson	at (<u>850</u>) <u>896</u> - Area Code Daytime	1075 Telephone Number
Enclose	d is a check for the f	ollowing amount:		
□ \$25.	00 Filing Fee		Certified Copy	Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

Coulthard	Enterprises LLC	
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number <u>L 14006186360</u>	by were filed onand assigned	ed
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liah	bility Company," the designation "LLC" or the abbreviation "L.L.C."	- +
Enter new principal offices address, if applicable:	2812 Briand, ff Rd	
(Principal office address MUST BE A STREET ADDRESS)	2812 Briand, ff Rd Panama City F1 3240,	
	2:	
Enter new mailing address, if applicable:	1-13 <u>-</u>	
(Mailing address MAY BE A POST OFFICE BOX)	20 to 10 to	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he	office address on our records, enter the name of	he new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
Norm Douglas and Are are or an area of the second s	тар Спи	

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.

f Changing Registered Agent, Signature of New Registered Agent

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If amendin	g Authorized Person(s) authorized to n I from our records:	nanage, enter the title, name, and address of eac	h person being ad	<u>ded</u>
MGR = N $AMBR = A$	Janager Authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGR.	Robert S Coultard	Jr 2812 Briarcliff-Pd	Æ Add	
•		Jr 2812 Briarcliff Rd Panama City F1 324	165 □ Remove	
			Change	
Ambe	Christy L Coulthard	Panama City FT 72405	_ DAdd	
		Panama City F7 72405	□ Remove	
			Change	
<u>Ambr</u>	Robert C Coulthurd	2812 Briarcliff RA Panama lity F1 32409	} ₹ŋ∧dd	
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Filing Fee: \$25.00