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To:		=
	Division of Corporations	A + 6
	Fax Number : (850)617-6383	
	למכט לבט(סטו) .	,
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From:		<u> </u>
	Account Name : FILINGS, INC.	· <del>-</del>
	Account Number : 072720000101	· · · · · · · · · · · · · · · · · · ·
		<u></u> =
	Phone : (954)791-2100	ver ∩
	Fax Number : (954)583-4117	<b>69</b> O
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

email,	Address:_		 	 	

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONCH COALITION LLC

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Corporate Filing Menu



# COVER LETTER

	Registration Se Division of Cor			
A	CONCH C	OALITION, LLC		
SUBJEC	CT:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	etum ali correspo	ndence concerning this matter	to the following:	
		DANIEL GOLDSTEIN		
			Name of Person	
		CONCH COALITION, LI	_C	
			Firm/Company	•
		10821 HAWKS VISTA S	TREET	
		· · · · · · · · · · · · · · · · · · ·	Address	
		PLANTATION, FL 33324	4	
		•	City/State and Zip Code	
		CONCHCOALITION@GF		
		E-mail address: (	to be used for future annual report noti	fication)
For furth	er information c	oncerning this matter, please or	all:	
DANIEL	L GOLDSTEIN		954 605-2850 at ( )	
	Name o	l Person	Arca Code Daytim	e Telephane Number
Enclosed	d is a check for th	ne following amount:		
	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 500 Status & Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Be	ING ADDRESS: ation Section on of Corporations ox 6327 assec, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

H18000187532

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

	lition							
( <u>Name of the Limited Lia</u> (A Flo	bility Compai orida Limited L	ny as it now appears on our reculability Company)	ords.)		_			
The Articles of Organization for this Limited Liability Florida document number L14000491577	y Company	were filed on DECEMBER	16, 2014	and	d assign	ned		
This amendment is submitted to amend the following	<b>;</b> ;							
A. If amending name, enter the new name of the l	imited liabi	lity company here:						
The new name must be distinguishable and contain the words "I	Limited Liabili	ity Company," the designation "L	LC" or the ab	breviatio	n "L.L.(	<del></del>		
Enter new principal offices address, if applicable:		10821 HAWKS VISTA ST	REET					
(Principal office address MUST BE A STREET AD	DRESS)	PLANTATION, FL 33324						
·					<del></del>			
Enter new mailing address, if applicable:		10821 HAWKS VISTA ST	REET		_ :	22V.63		
(Mailing address MAY BE A POST OFFICE BOX)		PLANTATION, FL 33324		<u> </u>		### r f		
B. If amending the registered agent and/or re- registered agent and/or the new registered office ac	gistered off ddress here	fice address on our reco	ds, enter:		<del>ာ င</del> ် ဘု	the nev		
Name of New Registered Agent: DA	NIEL GOLD	OSTEIN	<del></del>					
New Registered Office Address: 108	321 HAWKS	VISTA STREET			28 mg/s			
		Enter Florida street add	est					
PU	ANTATION	, ]	Florida <u>333</u>	324				
New Registered Agent's Signature, if changing Registe	wad Aganti	City		Zip Ci	ode			

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

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### H18000187532

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>	Type of Action
AMBR	DANIEL GOLDSTEIN	10821 HAWKS VISTA STREET	
		PLANTATION, FL 33324	☐ Remove
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E. Effective date, if other than	the date of filing:		(optional)		
E. Effective date, if other than (If an effective date is listed, the date <u>Note:</u> If the date inserted in thi.	must be specific and cannot be prior	r to date of filing or more th	on 90 days after filing.)	Pursuant to t	605.0207 isted as
document's effective date on the	e Department of State's records		·		
	yed effective date, but no	ot an effective time	, at 12:01 a.m. o	n the ear	rlier of
	record is filed.				
(b) The 90th day after the r					
If the record specifies a delar (b) The 90th day after the r Dated	2018	·		<u></u>	201
(b) The 90th day after the r	2018	<del></del> -		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2016
(b) The 90th day after the r		orized representative of a	nember		2018 Apr 25

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