

#L15000012298

Division of Corporations

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INFORMATION

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INSPIRED COASTAL HOMES, LLC**

Certificate of Status	0
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K. SALLY
EXAMINER
MAR 12 2015



March 11, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

INSPIRED COASTAL HOMES, LLC
417 BAY PALM DR
HOLMES BEACH, FL 34217US

SUBJECT: INSPIRED COASTAL HOMES, LLC
REF: L15000012298

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The effective date must be specific and cannot be prior to the date of filing.

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.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H15000061033
Letter Number: 315A00004984

15 MAR 11 10:10:00
DIVISION OF CORPORATIONS
INFORMATION SERVICES

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

INSPIRED COASTAL HOMES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on January 22, 2015 and assigned
Florida document number L15000012298

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

COASTAL INSPIRED HOMES, LLC

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

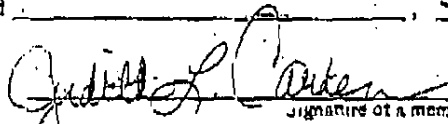
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Thomas M. Pechous</u>	<u>417 Bay Palm Drive</u>	<input checked="" type="checkbox"/> Add
		<u>Holmes Beach, FL 34217</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. 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 _____, 2/15/15



Judith L. Carden

Signature of a member or authorized representative of a member

Typed or printed name of signer

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