

L15000016527

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

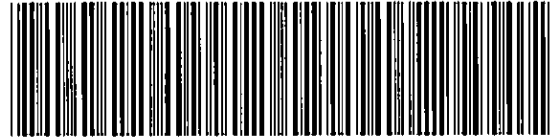
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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MAR 10 2021

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**DATE: 3/9/2021**

**NAME: COASTAL MIRAGE, LLC**

**TYPE OF FILING: AMENDMENT**

**COST: 25.00**

**RETURN: PLAIN COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

*Abbie Hodge*

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## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Coastal Mirage, LLC  
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:

Kerry Anne Schultz

Name of Person

Schultz Law Group, P.L.L.C.

Firm/Company

2779 Gulf Breeze Parkway

Address

Gulf Breeze, FL 32563

City/State and Zip Code

kaschultz@schultzlawgrp.com

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

For further information concerning this matter, please call:

Kerry Anne Schultz

850 754-1600  
at ( )

Name of Person

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

2021 MAR -9 AM 9:39

Coastal Mirage LLC

(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 1/14/2015 and assigned Florida document number L15000016527.

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 "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:

Kerry Anne Schultz

New Registered Office Address:

2779 Gulf Breeze Parkway

*Enter Florida street address*

Gulf Breeze

Florida 32563

*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.*

If Changing Registered Agent, Signature of New Registered Agent

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

\*\*\*\*\*Please see attachment\*\*\*\*\*

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated March 5<sup>th</sup> 2021

Signature of a member or authorized representative of a member

Stacy David McDuff  
Typed or printed name of signee

Filing Fee: \$25.00

2021 MAR -9 AM 9:40

Title	Name	Address	Type of Action
MGR	Alan Rea McDuff, Trustee of the McDuff Revocable Trust, dated 8/8/19	6210 Don Carolos Drive Pensacola, Florida 32507	REMOVE
MGR	Suzanne Hutto McDuff, Trustee of the McDuff Revocable Trust, dated 8/8/19	6210 Don Carolos Drive Pensacola, Florida 32507	REMOVE
AMBR	McDuff Revocable Trust, dated 8/08/2019	6210 Don Carolos Drive Pensacola, Florida 32507	ADD
MGR	Suzanne Hutto McDuff	6210 Don Carolos Drive Pensacola, Florida 32507	ADD
MGR	Alan Rea McDuff	6210 Don Carolos Drive Pensacola, Florida 32507	ADD
AMBR	McDuff Revocable Trust, dated 4/23/2020	7409 Camale Drive Pensacola, Florida 32504	ADD
MGRM	Melanie McDuff	7409 Camale Drive Pensacola, Florida 32504	ADD
MGRM	Stacy David McDuff	7409 Camale Drive Pensacola, Florida 32504	ADD