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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Enerald Green Coast Construction 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:
William B. Green III
Emerald Green Coast Construction
409 Dolphin St.
Gulf Breeze FL 3250
E-mail address: (to be used for future annual report notification) Granil. Com
For further information concerning this matter, please call:
William Green at (850) Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scrifficate of Status Status Scriffied Copy (additional copy is enclosed) \$25.00 Filing Fee Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certified Copy (certified Copy (additional copy is enclosed)

MAILING ADDRESS: 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

Name of the Limited Liability Comp (A Florida Limited	Sast Const	ruction
(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 15 (xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx</u>	y were filed on Ole/29/1	5 and assigned
This amendment is submitted to amend the following:		
· ·		
A. If amending name, enter the new name of the limited lial	bility company here:	
		*
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		7
(Principal office address MUST BE A STREET ADDRESS)		16 16
_		ARE CO
		SS N Press
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
manual and the second	- 1	<u> </u>
		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.		s, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	S.
	, Flo	orida
	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

	Authorized Person(s) authorized to ma from our records:	nnage, enter the title, name, and address of eac	h person being add
MGR= Ma AMBR= Au	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Michael Wayne Leave	ee. 5699 Crestwood Di.	,□ Add
	J	ee. 5699 Crestwood Dr. Milton = FC 320	Remove
			Change
1MBR	Donald Lee Allgood	604 College Dr. Brewton A1 3642	
		Brewton AT 3642	2 □ Remove
			Change
<u>AMBR</u>	Jason Thomas Did	cks 3038 E. Krngsfield	RA X Add
		Pensacola FL 3251	
			Change
			Add
			Remove
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an effective date is	if other than the date s listed, the date must be sp inserted in this block d	pecific and canno	ot be prior to da	ate of filing or	more than 90 da				
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Filing Fee: \$25.00