# L15000187424

(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
Cunning Instructions to	Filing Officer	· · · · · · · · · · · · · · · · · · ·
Special Instructions to	Filing Officer:	

Office Use Only



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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: West Coast Advisory Partners, 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:
Curtis Stokes Name of Person
Name of Person
West Coast Advisory Partners, LLC Firm/Company
مد
9385 N 56 h 5+,301
Address
TAMPA, FL 33617  City/State and Zip Code
CL Stokes 10 Verizon. NeT
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Curt's Sto/ses at 8/3 632-3/15  Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$ \$\times \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\$\$ \$Certified Copy (additional copy is enclosed)\$\$\$}\$\$\$ \$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 Taliahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2015 DEC 31 AM 10: 07

	OF		DE CRETARY OF STATE FALL ANASSEE, FLORIDA
West Coast	Advisory	Partners,	24C
(Name of the Limite	d Liability Company A Florida Limited Lia	as it now appears on bility Company)	our records.)
The Articles of Organization for this Limited Li Florida document number <u>L 15000187</u>		ere filed on ///	4/15 and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liabili	ty company here:	
The new name must be distinguishable and contain the we be the man of the man	ıble:		ation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I			
B. If amending the registered agent and/or the new registered of		ce address on ou	r records, enter the name of the
Name of New Registered Agent:	NI	9	
New Registered Office Address:		Enter Florida si	treet address
			, Florida
		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

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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Cultis Stokes	6211 Greenwich Dr Tampa, FL 33647	🗗 Ādd
		TAMPA, FL 33647	☐ Remove
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	ted, the date must be serted in this block of the date on the Depart	eted, the date must be specific and cannetted in this block does not meet to date on the Department of State's es a delayed effective date, after the record is filed.	eted, the date must be specific and cannot be prior to date erted in this block does not meet the applicable at date on the Department of State's records.  The specific and cannot be prior to date and cannot be prior to date and cannot be prior to date.	eted, the date must be specific and cannot be prior to date of filing or more that erted in this block does not meet the applicable statutory filing requedate on the Department of State's records.  The state of thing or more that erter the date of filing or mo	erted in this block does not meet the applicable statutory filing requirements, this date we date on the Department of State's records.  es a delayed effective date, but not an effective time, at 12:01 a.m. of effect the record is filed.	erted in this block does not meet the applicable statutory filing requirements, this date will not be listed attended to the date on the Department of State's records.  The state of the date of the

Page 3 of 3

Filing Fee: \$25.00