

L16 000187267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

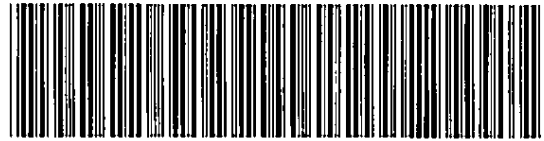
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/02/21--01016--006 \*\*225.00

2021-09-02 PM 14:15

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** PREMIER COAST REAL ESTATE SCHOOL, 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:

FRANK KEASLER, VP-STRATEGIES AND COMPLIANCE

Name of Person

G8 EQUITY, LLC

Firm/Company

9424 BAYMEADOWS ROAD, SUITE 110

Address

JACKSONVILLE, FL 32226

City/State and Zip Code

tkeasler@g8equity.com

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

For further information concerning this matter, please call:

FRANK KEASLER

904 208-8500

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

**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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PRES.	CEDRIC D. GRIFFIN	9424 BAYMEADOWS ROAD, STE. 110	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32256	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
V.P.	FRANK KEASLER	9424 BAYMEADOWS ROAD, STE. 110	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32256	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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[illegible]

(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)

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.

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**