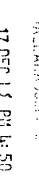


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COVER LETTER

TO:				*
CLIB II'				
SUBJE	CI;		ted Liability Company	
The encl	losed Articl	es of Amendment and fee(s) are sub-	nitted for filing.	
Please re	eturn all cor	respondence concerning this matter t	o the following:	
	Division of Curporations Coastal Screen Enclosures LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. the return all correspondence concerning this matter to the following: Steven Librino Name of Person Firm/Company 1446 Starboard st nw Address Palm Bay City/State and Zip Code coastalscreenenclosureslie@yahoo.com F-mail address: (to be used for future annual report notification) further information concerning this matter, please call: en librino Name of Person Area Code Daytime Telephone Number S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (catificate of Status) Certified Copy (additional copy is enclosed)			
			Name of Person	
			Firm/Company	
		1446 Starboard st nw		
			Address	
		Palm Bay		
			City/State and Zip Code	
		=		
r c				ication)
ror ium	ner miorma	ion concerning this matter, please ca	111:	
steven i	ibrino		321 2898575 at ()	
	N	ame of Person	Area Code Daytimo	: Telephone Number
Enclose	d is a check	for the following amount:		
\$25	.00 Filing F		Certified Copy	☐ S60.00 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Coastal Screen Enclosures LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited I.	and assigned		
lorida document number L17000037164			
his amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
he new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the designation "l	LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applic		1446 Starboard St NW	
Principal office address MUST BE A STREI		Palm Bay, Fl, 32907	17
, men and a general section of the s	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		m 48
			7
Enter new mailing address, if applicable:		1446 Starboard St NW	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		Palm Bay, Fl, 32907	
			ភ
If amending the registered agent and registered agent and/or the new registered or	_		ords, enter the name of the
		_	
Name of New Registered Agent:	Steven Librino		
New Registered Office Address:	1446 Starboard		
		Enter Florida street ad	
	Palm Bay		Florida 32907
		Cny	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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
mgr	Sarah A. Leach	7914 Northern Oak St	
		Melbourne, Fl 32904	■ Remove
			Add
			Remove
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s effectiv <u>te:</u> If th	date, if other than the date is listed, the date in he date in this is effective date on the	iust be specific and block does not i	d cannot be prior neet the applica	to date of filing or able statutory fili	more than 90 days	optional) safter filing.) Puri s, this date will	suant to 605.02 not be listed	207 (3)(as the
record The 90	d specifies a delay Oth day after the r	ed effective ecord is filed	date, but no	t an effective f	time, at 12	01 a.m. on	the earlier	of:
ted	ecember 12		2017/	-//				
			//(/	t / _=				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00