11700005915

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	· #)
· · ·	
(Business Entity Nam	ne)
(Document Number)	_
Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	
	1

Office Use Only



300301367973

87/18/17--01020--031 **30.00



D. SCOTT AUG 1 5 2017

COVER LETTER

Division of Corp				
SUBJECT: Gulf	Coast Realty Name of Lim	Solutions LLC ited Liability Company		2011 4 SLC TALL
				NO 15
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		m 🗾 🔻
Please return all correspon	ndence concerning this matter	to the following:		2017 AUG 15 AM IP: 33 SECRETARION
	Tyler BUTT	Name of Person		(2) (4) 가
		Name of Person		
	Gulf Coast	Realty Solutions LLC	· · · · · · · · · · · · · · · · · · ·	
		Firm/Company		
	1601 Eastern	Ave		
		Acc		
	Trause City	MI 49686		
	, .	City/State and Zip Code		
	TbuTlen	City/State and Zip Code ao Q 1 Ma.1. (om to be used for future annual report notific		
			cation)	1000
For further information ed	oncerning this matter, please ca	all:		京 第二
Tyler Buttle Name of	r Person	at (231) 463-90 Area Code Daytime	764 Telephone Number	FILED W # 32
		,	•	
Enclosed is a check for th	e following amount:			32
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &

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

GUIF Coast Re	alty Solutions	llc		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appe a Limited Liability Company	ars on our records.)		
The Articles of Organization for this Limited Liability C	Company were filed on _	3/06/2017	and assi	gned
Florida document number <u>L 17000050915</u>	<u>_</u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company	<u>here</u> :		
Florida Coast Home Bure The new name must be distinguishable and contain the words "Lin	15 LLC			
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the	designation "LLC" or the a	bbreviation "L.L	C."
Enter new principal offices address, if applicable:			<u>-</u>	
(Principal office address MUST BE A STREET ADDI	RESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or regis		on our records, <u>enter</u>	the name o	f the ne
registered agent and/or the new registered office add	ress nere:		, -	
			当 7	
Name of New Registered Agent:			- 11 万	
New Registered Office Address:				
	Enter Fl	orida street address	n. Ot	[1]
		, Florida	<u>in</u> . I	\mathcal{O}
	Ciţ		Zip.Code	
New Registered Agent's Signature, if changing Registere	d Agent:		32 94	,

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			☐ Remove
			Change
			D Add
			Remove
			Change
		,	
			□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			Add T
		 	Remove O
			Remove Change
			Add
			□ Remove
			☐ Change

					•
					
					•
					•
					
		•			
		 			
					-
					-
					•
					•
				三二二	
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
				<u> </u>	, .
	_		·	· · · · · · · · · · · · · · · · · · ·	·)
					-
					: 2
		 ,,			
ective date, if other that effective date is listed, the date: If the date inserted in ument's effective date on	ate must be specific and can this block does not meet	not be prior to date of t the applicable statu	filing or more than 90 day	(optional) 's after filing.) Pursuant to 60: ts, this date will not be list	5,020 ed a
record specifies a de he 90th day after th		e, but not an effo	ective time, at 12	:01 a.m. on the earli	ero
ted	·· _	·			
			esentative of a member		
	- / ///				

Page 3 of 3

Filing Fee: \$25.00