

L17000 052 199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2019 AUG -5 P 2:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 09 2019

T. LEMIEUX

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nichole Perhat Causton  
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:

Nichole Causton

Name of Person

Firm/Company

400 Indian Trail

Address

Destin, FL 32541

City/State and Zip Code

ncdestin@hotmail.com

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

For further information concerning this matter, please call:

Nichole Causton

Name of Person

at ( 850 )

Area Code

714-7000

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/COURIER ADDRESS:**

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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

Nichole Pernat Causton, LLC

(Name of the Limited Liability Company as it now appears on our records,  
(A Florida Limited Liability Company))

2017 JUN -5 P 2 10

The Articles of Organization for this Limited Liability Company were filed on 4/5/2017 and assigned

Florida document number # L17000052199

3/6/2017

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Go Coastal Realty, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

327 Mountain Dr.

Destin, FL 32541

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

327 Mountain Dr.

Destin, FL 32541

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Nichole Causton

New Registered Office Address:

327 Mountain Dr.

Enter Florida street address

Destin

City

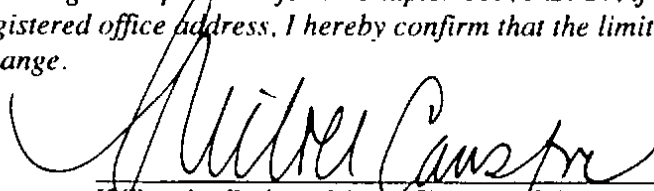
Florida

32541

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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated

Signature of a member or authorized representative of a member

Typed or printed name of signee