

L17000 123 711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

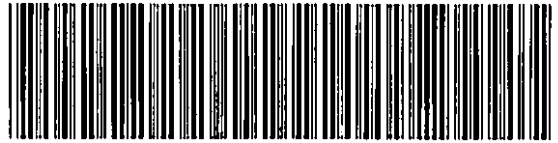
(Business Entity Name)

(Document Number)

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2019 OCT 21 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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OCT 21 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 13, 2019

EMERALD COAST MAINTENANCE AND RESTORATION LLC
362 OLD FERRY DOCK ROAD
EAST POINT, FL 32328

SUBJECT: EMERALD COAST MAINTENANCE AND RESTORATION LLC
Ref. Number: L17000123711

We have received your document for EMERALD COAST MAINTENANCE AND RESTORATION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 819A00019002

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Emerald Coast Maintenance and Restoration, 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:

Daniel Roberts

Name of Person

Emerald Coast Maintenance and Restoration, LLC

Firm/Company

23 Washington Street

Address

East Point, Florida 32328

City/State and Zip Code

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

For further information concerning this matter, please call:

Daniel Roberts

850 559-0951
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/COURIER ADDRESS:

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

2019 OCT 21 04:11:53

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

EMERALD COAST MAINTENANCE AND RESTORATION LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10/30/2018 and assigned
Florida document number L17000123711.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

23 WASHINGTON STREET

Enter Florida street address

EAST POINT, Florida 32328

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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	TERRY NOWLING	687 WILDERNESS RD	<input checked="" type="checkbox"/> Add
		EAST POINT, FLORIDA 32328	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BRUCE R ROTELLA	620 WILDERNESS RD.	<input type="checkbox"/> Add
		EAST POINT, FLORIDA 32328	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DOMINICK ROTELLA	618 WILDERNESS RD.	<input type="checkbox"/> Add
		EAST POINT, FLORIDA 32328	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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.

David Burt
Signature of a member or authorized representative of a member

Typed or printed name of signee