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COVER LETTER

TO: Registration Se Division of Cor			
	illiams, PLLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Ryan Williams, Esq.		
		Name of Person	
	Leeds & Williams, PLLC		
	105 Solana Road, Suite C		
		Address	
	Ponte Vedra Beach, Florid	a 32082	
		City/State and Zip Code	
	rwilliams@lawpvb.com	188	
For further information co	e-mail address: (oncerning this matter, please ca	to be used for future annual	peport nonneation)
Ryan Williams, Esq.			q-4100
Name o	Person	at () Area Code	Daytime Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee of Certified Copy (additional copy is end	Certificate of Status &
Registr Divisio P.O. Bo	ING ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314	Registrat Division Clifton E 2661 Exc	COURIER ADDRESS: ion Section of Corporations stallding coutive Center Circle sec. FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Leeds & Williams, PLLC				
(Name of the Limited Liability Company (A Florida Limited Lia	y as it nov ability Cor	appears on our records.) ippany)		
The Articles of Organization for this Limited Liability Company we Florida document number <u>L17000146819</u> .	vere filec	on 07/10/2017	and assign	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ity comp	pany here:		
Coastal Law Group, PLLC				
The new name must be distinguishable and contain the words "Limited Liability	y Compan	y," the designation "LLC" or the	e 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 offi registered agent and/or the new registered office address here:		ress on our records, <u>ent</u>	er the name of	⊞e net ≤∽
tegistered agent and/or the new registered ornee aguress here.	•		JAN	SIQ.
Name of New Registered Agent:			X 2	SE A
Name of New Registered Agent.				- 000 - 000
New Registered Office Address:		Inter Florida street address	<u>\$</u> _	- 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	12		Ö: F ,	STATE ORATIONS
	City	, Florida	Zip Code	- 2
New Registered Agent's Signature, if changing Registered Agent:	•		•	
I hereby accept the appointment as registered agent and agree	a to act	in this convicts. I finisher	aurea to comply	with th
rnereny accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performa vovided j	ince of my duties, and I a for in Chapter 605, F.S. (m familiar with a Or, if this docume	ınd
If Chang	ing Regis	tered 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>Address</u> Type of Action <u>Title</u> Name 105 Solana Road Suite C T. Ryan Williams, P.A. MGR _□ Add Ponte Vedra Beagh, Florida 32082 ■ Remove ☐ Change 105 Solana Road Suite C Ryan Williams MGR **■** Add Ponte Vedra Beach, Florida 32082 ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add _ RerAca □ Chafige □ Add 🧖 ☐ Remove ☐ Change

D. If amending any other informat	ion, enter change(s) here: (A	Attach additional sheets, if	necessary.)	
- '				

		-		
	<u> </u>			
E. Effective date, if other than the (If an effective date is listed, the date must	date of filing:	(1)	optional)	1207 (23K)
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable	statutory filing requirements	s, this date will not be listed	as the
If the record specifies a delayed (b) The 90th day after the reco		effective time, at 12:	01 a.m. on the earlier	r of:
Dated	2018		26	SEC
111	1		JAN 26	RETAR ON OF C
tV	Signature of a member or authorized	d representative of a member		ORPC ORPC
Ryan Williams				STATI JRATI
***	Typed or printed na	me of signer	F	4 2º

Page 3 of 3

Filing Fee: \$25.00