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K. SALY JAN 12 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Gulf Beach Life 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:
Dean Senovere
Gulf Beach Life Firm/Company
5374 River Birch Lane
City/State and Zip Code Sold by din 0 @ gmail . Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dean Genalese at 404 626-4838 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc
(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

OIVISION OF RY OF STATE

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	Of JAN 12 VARITOR
(Name of the Limited Liability C	Company as it now appears on our records.) mited Liability Company)
is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: Gulf Beach Life Realty LLC enew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" after new principal offices address, if applicable: rincipal office address MUST BE A STREET ADDRESS) There new mailing address, if applicable: Inter new mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new gistered agent and/or the new registered office address here: Name of New Registered Agent:	
(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	
(11 P. i 1 P.	· .
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRES	SS) 15817 Front Beach Rd 1-800 Panama City Bioch, Fl 3241
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
irraining address their majori out of the control	
B. If amending the registered agent and/or registered agent and/or the new registered office address	red office address on our records, <u>enter the name of the new</u> <u>ss here</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
	City Zip Coac

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		DIVISION OF CORPO	SINTE RATIONS
<u>Title</u>	<u>Name</u>	Address	2: 20 Type of Action
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	(notional)	
Note:	ive date, if other than the date of filing:	.0207 (3 ed as th
the re) The	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlies 90th day after the record is filed.	er of:
Dated	·	
	Signature of a member of authorized representative of a member	

Page 3 of 3

Typed or printed name of signer

Filing Fee: \$25.00