

L17000 217640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

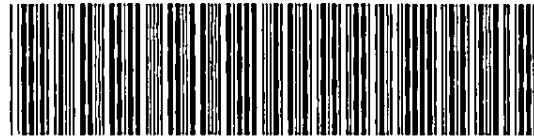
(Document Number)

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18 JAN 22 PM 4:09  
DIVISION OF REVENUE  
STATE OF NEW YORK

K. SALY  
JAN 22 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Costal Pool Services 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:

Courtney N. Kelley  
Name of Person

Costal Pool Services LLC  
Firm/Company

20151 Welborn RD.  
Address

North Ft. Myers FL 33917  
City/State and Zip Code

CPSCourtney@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Reinbein or Courtney Kelley at (239) 887-9513 or 561-459-0878  
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

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

Costal Pool Services LLC

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

SECRETARY  
DIVISION OF CORPORATIONS  
18 JAN 22 PM 4:09

The Articles of Organization for this Limited Liability Company were filed on October 20, 2017 and assigned Florida document number L17000217640.

This amendment is submitted to amend the following:

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

Costal Home and Pool Services 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**)

20151 Welborn Rd.

NORTH PT. MYERS FL 33917

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

Same as above

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:

N/A

New Registered Office Address:

Enter Florida street address

Florida

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.

N/A

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>
N/A			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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Seal of the State of New York  
DIVISION OF COMMUNICATIONS  
18 JAN 22 PM 4:09

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

SECRETARY OF STATE  
DIVISION OF  
18 JAN 22 PM 4:09

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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)

**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.

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.

Dated December 12~~10~~ 2017 08<sup>th</sup> . 2017

Courtney Kelley

Signature of a member or authorized representative of a member

Courtney Kelley

Typed or printed name of signer



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 13, 2017

COURTNEY KELLEY  
20151 WELBORN RD  
N FT MYERS, FL 33917

SUBJECT: COSTAL POOL SERVICES LLC  
Ref. Number: L17000217640

We have received your document for COSTAL POOL SERVICES 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document number of the name conflict is L03000054290.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 217A00025204

2017 DEC 26 PM 2:55



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 29, 2017

COASTAL POOL SERVICES LLC  
COURTNEY N KELLEY  
20151 WELBORN RD.  
NORTH FT. MYERS, FL 33917

SUBJECT: COSTAL POOL SERVICES LLC  
Ref. Number: L17000217640

We have received your document for COSTAL POOL SERVICES 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is M68453 "COASTLINE POOL SERVICE, INC.".

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) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 117A00026403

**RECEIVED**

JAN 22 2018